

FILED
Apr 28, 2008 08:00 AM
Secretary of State

**2008 LIMITED LIABILITY COMPANY
 ANNUAL REPORT**

DOCUMENT # L05000119342 1. Entity Name DREAN, LLC		
Principal Place of Business 601 CYPRESS PL DR E PEMBROKE PINES, FL 33027	Mailing Address 3318 BRADENHAM LANE DAVIE, FL 33328	
DO NOT WRITE IN THIS SPACE		
4. FBI Number 20-3965555		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent RICHARDSON, EVELYNE 3318 BRADENHAM LANE DAVIE, FL 33328		
DO NOT WRITE IN THIS SPACE		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent or both. In the State of Florida, I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent's signature required when withdrawing) Signature typed or printed name of registered agent, and title if applicable		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$338.75		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM RICHARDSON, EVELYNE 3318 BRADENHAM LANE DAVIE, FL 33328	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	U000000924563 05/19/08-80006-014 138.75 DO NOT WRITE IN THIS SPACE	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		
SIGNATURE: Evelynne Richardson 04-26-08 (954) 370-3949		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		