2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000123267

1. Entity Name
DDS INVESTMENTS, LLC



FILED
Mar 12, 2008 08:00 AN
Secretary of State

Principal Place of Business 917 NORTH, NORTH LAKE DRIVE HOLLYWOOD, FL 33019-1112 Mailing Address

917 NORTH, NORTH LAKE DRIVE HOLLYWOOD, FL 33019-1112



03082008 No Chg-LLC

CR2E083 (12/07)

| 4. FEI Number 20-4132034 | | Applied For Not Applicable |
|----------------------------------|-------------------|-------------------------------|
| 5. Certificate of Status Desired | \$5.00 Fee Rec | Additional |

6. Name and Address of Current Registered Agent

SPECHLER, BRENT 917 NORTH, NORTH LAKE DRIVE HOLLYWOOD, FL 33019-1112

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| | named entity submits this statement for the purpose of char ions of registered agent. | iging its registered dirice or registered agent | , or both, in the state of riorida. Tan familiar with, and accept | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstation | | | DATE | | |
| | : NOW!!! FEE IS \$138.75 7 1, 2008 Fee will be \$538.75 | 3 | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | A Company of the Comp | | |
| TITLE | MGRM | | | | |
| NAME | SPECHLER, BRENT | | , · · | | |
| STREET ADDRESS | 917 NORTH, NORTH LAKE DRIVE | | | | |
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| indicated | certify that the information supplied with this filling does not I on this report is true and accurate and that my signature s ability company or the receiver or trustee empowered to ext | shall have the same legal effect as if made u | pter 119, Florida Statutes. I further certify that the information inder oath; that I am a managing member or manager of the , Florida Statutes. | | |