

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011729

Entity Name: DIKAM ENTERPRISES, LLC

FILED  
Apr 11, 2009  
Secretary of State

## Current Principal Place of Business:

17149 NW 10TH STREET  
PEMBROKE PINES, FL 33028

## New Principal Place of Business:

## Current Mailing Address:

17149 NW 10TH STREET  
PEMBROKE PINES, FL 33028

## New Mailing Address:

FEI Number: 20-4252998

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STREETE, DOUGLAS  
17149 NW 10TH STREET  
PEMBROKE PINES, FL 33028 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: STREETE, DOUGLAS  
Address: 17149 NW 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR ( ) Delete  
Name: STREETE, YVONNE  
Address: 17149 NW 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: DP (X) Change ( ) Addition  
Name: STREETE, DOUGLAS  
Address: 17149 NW 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: STREETE, DIONNE  
Address: 17149 NW 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR ( ) Change (X) Addition  
Name: STREETE, KAMILLE  
Address: 17149 NW 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DOUGLAS STREETE

MR

04/11/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date