

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034936

FILED
Jul 05, 2007
Secretary of State

Entity Name: DIMENSIONS INVESTMENTS LLC.

Current Principal Place of Business:

120 EAST OAKLAND PARK BLVD
#105
FT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

19601 W. OAKMONT DR
HIALEAH, FL 33015

New Mailing Address:

FEI Number: 63-0633708 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HAWKINS, LOYE N
19601 W. OAKMONT DR
HIALEAH, FL 33015 US

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: HAWKINS, LOYE N
Address: 19601 W. OAKMONT DR
City-St-Zip: HIALEAH, FL 33015

Title: MGR () Delete
Name: DIXON, VERLENE D
Address: 6039 COLLINS AVE #1715
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR () Delete
Name: BRADY, PATRICIA
Address: 2935 NE 163 STREET #2H
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGR () Delete
Name: MINA TOLEDO, SANDRA
Address: 2962 SW 135 AVE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES:

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

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

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

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

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: LOYE N. HAWKINS

MGR

07/05/2007

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