2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000046686

Name:

Address:

City-St-Zip:

LOPEZ, ANTONIO

3116 PENWA COURT

LONGWOOD, FL 32779

Entity Name: NEW DMDJ DONUTS, LLC

FILED May 17, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4510 WEST STATE ROAD, 46 SANFORD, FL 32771 **Current Mailing Address: New Mailing Address:** 4510 WEST STATE ROAD, 46 SANFORD, FL 32771 FFI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () 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: KINSLEY, BRIAN P KINSLEY, BRIAN P 1642 TENNYSON CT. 251 ALTAMONTE COMMERCE BLVD LAKE MARY, FL 32746 US SUITE 1410 ALTAMONTE SPRINGS, FL 32714 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: 05/17/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete KINSLEY, BRIAN P Name: Name: Address: 1642 TENNYSON CT. Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: THOMPSON, D. MICHAEL Name: Address: 1684 CHERRY RIDGE DR. Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: MGR () Delete Title: () Change () Addition THOMPSON, STEPHEN E Name: Name: 296 CHISWELL PLACE Address: Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: MGR () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BRIAN KINSLEY MNGR 05/17/2007