

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000082006

Entity Name: DFW PROPERTIES, LLC

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

830 ARGONAUT ISLE
DANIA BEACH, FL 33004

New Principal Place of Business:

Current Mailing Address:

830 ARGONAUT ISLE
DANIA BEACH, FL 33004

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

POESCHEL, BRIAN
830 ARGONAUT ISLE
DANIA BEACH, FL 33004 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: POESCHEL, BRIAN
Address: 830 ARGONAUT ISLE
City-St-Zip: DANIA BEACH, FL 33004

Title: MGR () Delete
Name: HUDSON, ANDY
Address: 1087 SATIN LEAF STREET
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR () Delete
Name: R J GORDON REVOCABLE, TRUST U/A/D 6 / 13/2006
Address: 10211 PINES BLVD #142
City-St-Zip: PEMBROKE PINES, FL 33026

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:

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: BRIAN POESCHEL

MGR

05/02/2007

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