2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2007
Secretary of State

DOCUMENT# L06000101305

Entity Name: DALMAR 0487, L.L.C.

Current Principal Place of Business:

1247 ALTON ROAD
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

304 NE 23 ST
SUITE 1
MIAMI, FL 33137 US

Current Mailing Address:

1247 ALTON ROAD
MIAMI BEACH, FL 33139 US

New Mailing Address:

304 NE 23 ST
SUITE 1
MIAMI, FL 33137 US

FEI Number: 20-5732540 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUERRA, LINETTE M
1247 ALTON ROAD
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

GUERRA, LINETTE M
304 NE 23 ST
SUITE1
MIAMI, FL 33137 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: 03/14/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: VILLAFANE, CLAUDIA R
Address: 1247 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete
Name: VILLAFANE, DALMA N
Address: 1247 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: VILLAFANE, CLAUDIA R
Address: 304 NE 23 ST SUITE 1
City-St-Zip: MIAMI, FL 33137

Title: MGRM (X) Change ( ) Addition
Name: VILLAFANE, DALMA N
Address: 304 NE 23 ST SUITE 1
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information supplied with this filing does not qualify for the 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: C. VILLAFANE MGRM 03/14/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date