2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# L06000111562

Entity Name: DREAM VACATIONS LLC

Current Principal Place of Business:

401 E. LAS OLAS BOULEVARD
#130-147
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

401 E. LAS OLAS BOULEVARD
#130-147
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 20-5786714 **FEI Number Applied For ( )** **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:

KC CALDWELL CPA, INC.
3720 COCONUT CREEK PARKWAY
STE - D
COCONUT CREEK, FL 33066 US

Name and Address of New Registered Agent:

KC CALDWELL CPA, INC.
7501 NW 4TH STREET
STE - 112
PLANTATION, FL 33317 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: KC CALDWELL 05/01/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: CARLTON, SANDRA M
Address: 401 E. LAS OLAS BLVD, #130-147
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

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: SANDRA M. CARLTON P 05/01/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date