

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000046743

**FILED  
Apr 30, 2009  
Secretary of State**

**Entity Name:** MAGLI DUNN LLC

**Current Principal Place of Business:**

840 SW 49TH TERRACE  
MARGATE, FL 33068

**New Principal Place of Business:**

**Current Mailing Address:**

840 SW 49TH TERRACE  
MARGATE, FL 33068

**New Mailing Address:**

**FEI Number:** 20-8956370      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MAGLI, DAVID  
840 SW 49TH TERRACE  
MARGATE, FL 33068    US

**Name and Address of New Registered Agent:**

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: MAGLI, DAVID  
Address: 840 SW 49TH TERRACE  
City-St-Zip: MARGATE, FL 33068

Title: MGR      ( ) Delete  
Name: MAGLI, NADIA R  
Address: 840 SW 49TH TERRACE  
City-St-Zip: MARGATE, FL 33068

**ADDITIONS/CHANGES:**

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: DAVID MAGLI      MGR      04/30/2009

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