

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055259

Entity Name: DM OF AMERICA, LLC

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

7751 KINGSPONTE PARKWAY
125
ORLANDO, FL 32819

Current Mailing Address:

7751 KINGSPONTE PARKWAY
125
ORLANDO, FL 32819

New Principal Place of Business:

7751 KINGSPONTE PARKWAY
125
ORLANDO, FL 32819 US

New Mailing Address:

7751 KINGSPONTE PARKWAY
125
ORLANDO, FL 32819 US

FEI Number: 26-0801287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOSELLI, RUBERTO
7751 KINGSPONTE PARKWAY
125
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

BOSELLI, ROBERTO
7751 KINGSPONTE PARKWAY
125
ORLANDO, FL 32819 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: ROBERTO BOSELLI

01/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FANTIN, DENIZ
Address: RUA WIEGANDO OLSEN, 2020
City-St-Zip: CIC, CURITIBA, PR 81460-070 BR

Title: MGR () Delete
Name: FANTIN, GIOVANO
Address: RUA WIEGANDO OLSEN, 2020
City-St-Zip: CIC, CURITIBA, PR 81460-070 BR

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: DENIZ FANTIN

MGR

01/07/2008

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