

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000063030

FILED
Apr 03, 2008
Secretary of State

Entity Name: D & D GLOBAL ENTERPRISES, LLC.

Current Principal Place of Business:

2116 HARBOUR WATCH DR
TARPON SPRINGS, FL 34689 FL

New Principal Place of Business:

36750 US 19 N
PALM HARBOR, FL 34684 FL

Current Mailing Address:

2116 HARBOUR WATCH DR
TARPON SPRINGS, FL 34689 FL

New Mailing Address:

36750 US 19 N
PALM HARBOR, FL 34684 FL

FEI Number: 26-0370243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, SCOTT F
4890 W KENNEDY BLVD
240
TAMPA, FL 33609 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: JANNIKSEN, DAN L
Address: 2116 HARBOUR WATCH DR
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: MGR () Delete
Name: JANNIKSEN, DAN
Address: 2116 HARBOUR WATCH DR
City-St-Zip: TARPON SPRINGS, FL 34689 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SCHNEIDER, MICHAEL
Address: 36750 US 19 N
City-St-Zip: PALM HARBOR, FL 34684 US

Title: MGR (X) Change () Addition
Name: JANNIKSEN, DAN
Address: 208 NW 1ST AVE
City-St-Zip: BOYNTON BEACH, FL 33435 US

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: MICHAEL SCHNEIDER

MR

04/03/2008

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