2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000065095

Entity Name: DOM REAL ESTATE LLC

FILED Jul 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17395 N. BAY ROAD 17555 COLLINS AVE

SUITE 208 SUITE 905

SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

17395 N. BAY ROAD 17555 COLLINS AVE

SUITE 208 SUITE 905

SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

FEI Number Applied For () FEI Number Not Applicable (X) 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: Name and Address of New Registered Agent:

NATALIE, ZLOCHEVSKY LENARD, GERB

17555 CÓLLINS AVENUE 17555 COLLINS AVENUE

905 905

SUNNY ISLES BEACH, FL 33160 US SUNNY ISLES BEACH, FL 33160 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: NATALIE ZLOCHEVSKY 07/22/2009

> Electronic Signature of Registered Agent Date

> > ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

MGR Title: () Delete

(X) Change () Addition GERB, JACOB NATALYA, ZLOCHEVSKY Name: Name:

Address: 17555 COLLINS AVENUE, SUITE 905 Address: 17555 COLLINS AVENUE, SUITE 905 City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR (X) Delete Title: () Change () Addition

Name: GERB, LENARD Name: Address: 17555 COLLINS AVENUE, SUITE 905 Address: City-St-Zip: SUNNY ISLES BEACH, FL 33160 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: LENARD GERB 07/22/2009