

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000056480

FILED  
May 01, 2010  
Secretary of State

Entity Name: DIANA DRIVE, LLC

**Current Principal Place of Business:**

714 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

**Current Mailing Address:**

714 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33019

**New Mailing Address:**

FEI Number: 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:**

IVETTE RODRIGUEZ, P.A.  
201 ALHAMBRA CIRCLE  
SUITE 500  
CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MILLER, NANCY  
Address: 714 HOLLYWOOD BLVD  
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR  
Name: DIOGUARDI, PAUL & MICHELLE  
Address: 730 WEST MAIN STREET  
City-St-Zip: ASPEN, CO 81611

Title: MGR  
Name: DIOGUARDI, ANTHONY  
Address: 244 W. MAIN STREET  
City-St-Zip: CARY, IL 60013

Title: MGR  
Name: MATTSON, ROBERT  
Address: C/O 714 HOLLYWOOD BLVD  
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR  
Name: MOSTER, KIMBERLY M  
Address: C/O 714 HOLLYWOOD BLVD.  
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR  
Name: MATTSON, JENIFFER  
Address: C/O 714 HOLLYWOOD BLVD.  
City-St-Zip: HOLLYWOOD, FL 33019

I hereby 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: NANCY B MILLER

MGR

05/01/2010

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