

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000065144

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: DISABILITY INSURANCE LAW GROUP, PL

## Current Principal Place of Business:

1111 HYPOLUXO ROAD  
SUITE #110  
LANTANA, FL 33462

## New Principal Place of Business:

5803 NW 151 STREET  
SUITE #200A  
MIAMI LAKES, FL 33014

## Current Mailing Address:

1111 HYPOLUXO ROAD  
SUITE #110  
LANTANA, FL 33462

## New Mailing Address:

5803 NW 151 STREET  
SUITE #200A  
MIAMI LAKES, FL 33014

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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: MGRM ( ) Delete  
Name: CHMIELARZ & SMITH, PA  
Address: 1111 HYPOLUXO ROAD  
City-St-Zip: LANTANA, FL 33462

Title: MGRM ( ) Delete  
Name: FLOWERS PAULINO-GRISHAM PL  
Address: 1111 HYPOLUXO ROAD  
City-St-Zip: LANTANA, FL 33462

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: CHMIELARZ & SMITH, PA  
Address: 5803 NW 151 STREET, STE. 200A  
City-St-Zip: MIAMI LAKES, FL 33014

Title: MGRM (X) Change ( ) Addition  
Name: PAULINO-GRISHAM PLLC  
Address: 825 LAKE AVENUE NORTH  
City-St-Zip: DELRAY BEACH, FL 33483

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: MELINDA L. CHMIELARZ PRES 04/30/2009

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