

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000073946

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: DREAM CONSULTING LLC

**Current Principal Place of Business:**

8224 NW 115 COURT  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

8224 NW 115 COURT  
DORAL, FL 33178

**New Mailing Address:**

FEI Number: 26-3116600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANTANA, FRANCISCO J  
8224 NW 115 COURT  
DORAL, FL 3178 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: SANTANA, FRANCISCO J  
Address: 8224 NW 115 COURT  
City-St-Zip: DORAL, FL 33178

Title: MGRM ( ) Delete  
Name: PARDO PELAEZ, MAURICIO  
Address: 1560 SW 190 AVE  
City-St-Zip: PEMBROKE PINES, FL 33029

**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: MAURICIO PARDO PELAEZ

MGRM

03/21/2009

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