

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000037201

**FILED**  
**Feb 20, 2012**  
**Secretary of State**

**Entity Name:** DR GROUP INVESTMENT LLC

**Current Principal Place of Business:**

4210 SABAL RIDGE CIR  
WESTON, FL 33331 US

**New Principal Place of Business:**

**Current Mailing Address:**

4210 SABAL RIDGE CIR  
WESTON, FL 33331 US

**New Mailing Address:**

**FEI Number:** 45-1209501

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SILVAS FINANCIAL SERVICES, L.L.C.  
5220 S UNIVERSITY DR  
STE C-102  
DAVIE, FL 33328 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  
**Name:** ROSALES, DAVID  
**Address:** 4210 SABAL RIDGE CIR  
**City-St-Zip:** WESTON, FL 33331 US

**Title:** MGRM  
**Name:** ORTEGA, ALIX  
**Address:** 4210 SABAL RIDGE CIR  
**City-St-Zip:** WESTON, FL 33331 US

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:** DAVID ROSALES

MGRM

02/20/2012

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