

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005997

FILED
Apr 30, 2008
Secretary of State

Entity Name: DIRECT APPAREL FACTORIES INTERNATIONAL TRADE, L.L.C.

Current Principal Place of Business:

7801 NW 37 STREET OF 202-A
MIAMI, FL 33166

New Principal Place of Business:

5560 NW 107 AVE APT 1015
DORAL, FL 33178

Current Mailing Address:

7801 N.W. 37 ST., #202-A
MIAMI, FL 33166

New Mailing Address:

5560 NW 107 AVE APT 1015
DORAL, FL 33178

FEI Number: 65-0949739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUAREZ, MARIO
7801 NW 37 ST., #202-A
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

SUAREZ, MARIO
5560 NW 107 AVE APT 1015
DORAL, FL 33178 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: MARIO SUAREZ

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: SUAREZ, MARIO E
Address: 7801 NW 37 ST #202-A
City-St-Zip: MIAMI, FL 33166

Title: VP () Delete
Name: GUTIERREZ, LUCY
Address: 5560 NW 107 AVE # 1015
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: SUAREZ, MARIO E
Address: 5560 NW 107 AVE APT 1015
City-St-Zip: DORAL, FL 33178

Title: VP (X) Change () Addition
Name: GUTIERREZ, LUCY
Address: 5560 NW 107 AVE # 1015
City-St-Zip: DORAL, FL 33178

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: MARIO E SUAREZ

P

04/30/2008

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