

# 2001 UNIFORM BUSINESS REPORT (UBR)

0011934 AF

DOCUMENT # L99000008004

1. Entity Name  
DYM FINANCIAL GROUP, LLC

FILED

01 APR -9 AM 7:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
~~2400 EAST COMMERCIAL BLVD., SUITE 517~~  
~~FT. LAUDERDALE FL 33308~~

Mailing Address  
2400 EAST COMMERCIAL BLVD., SUITE 517  
FT. LAUDERDALE FL 33308



2. Principal Place of Business  
2424 N. Federal Hwy

3. Mailing Address  
2424 N. Federal Hwy

Suite, Apt. #, etc.  
Suite 411

Suite, Apt. #, etc.  
Suite 411

City & State  
Boca Raton FL

City & State  
Boca Raton FL

Zip  
33431

Country  
USA

Zip  
33431

Country  
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number ~~APPLIED FOR~~  
65-0984257

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DE MEO, ANTHONY  
2400 EAST COMMERCIAL BLVD., SUITE 517  
FT. LAUDERDALE FL 33308

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE MGR MEMBER ☐ Delete  
NAME DEMEO, YOUNG, MCGRATH & COMPANY P.A.  
STREET ADDRESS 2400 E. COMMERCIAL, SUITE 517  
CITY-ST-ZIP FT. LAUDERDALE FL 33308

TITLE MGR ☐ Change ☒ Addition  
NAME DONALD J. CAMPAGNA  
STREET ADDRESS 2424 N. Federal Hwy Ste 411  
CITY-ST-ZIP Boca Raton, FL 33431

TITLE MGR ☐ Delete  
NAME DONALD J. CAMPAGNA  
STREET ADDRESS 2424 N. FEDERAL HWY, SUITE 411  
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Delete  
NAME  
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TITLE ☐ Change ☐ Addition  
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TITLE ☐ Delete  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: De Meo, Young, McGrath & Co., P.A., Manager

3/13/01 954-351-9800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Anthony De Meo, President

CR2E083 (11/00)