2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

FILED Apr 27, 2005 8:00 am Secretary of State

DOCUMENT # L9900009293 1. Entity Name D'ASIGN ESCAPES LLC						(14-27-2005 902	273 001 *	**200.0	0	
Principal Place of Business 11500 OVERSEAS HWY. MARATHON, FL 33050		Mailing Address 11500 OVERSEAS HWY. MARATHON, FL 33050			1 / 1 6 7 1 1 1 1 1 1 1 1	3600 4 8		1 14 2/3 1 5/15 14	III (() (II)		
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				04092005	Chg-LLC	CR2E08	3 (10/03)		
City & State		City & State				4. FEI Number 65-0529929				plied For at Applicable	
Zip . 	Country	Zip				5. Certificate of Status Desired			\$5.00 Additional Fee Required		
	6. Name and Address of Current	Registered Agent		Name		7. Name and	Address of New Re	gistered A	gent		
11500 OV	O, FRANCO L ERSEAS HWY. DN, FL 33050	Street Addre			Idress (P	O. Box Numbe	r is Not Acceptable)	FL	Zip Code	a	
	named entity submits this statement for tions of registered agent.						n, in the State of Flor	ida. I am ta	l miliar with,	and accept	
	Signature, typed or printed name of registered agent a	and tale if applicable. (NOTE	E: Registered	Agent signaturi	e required w	hen reinstating)		DATE			
Fi D	iling Fee is \$50.00 ue by May 1, 2005					Make check payable to Florida Department of State					
9.	MANAGING MEMBE	RS/MANAGERS	10.				ADDITIONS/0	CHANGES			
ITTLE NAME STREET ADDRESS CITY-ST-ZIP	MGR D'ASCANIO, ANTHONY 204 S. ANGLERS DR. MARATHON, FL 33050	☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS			26845 HW PL 33051	Y	Change	Addition	
TITLE NAME STREET ADDRESS CITY-SE-ZIP	MGR D'ASCANIO, AMEDEO 295 14TH STREET KEY COLONY BEACH, FL 3305	☐ Delete	TITLE NAME STREET CITY-S	(1150	ი (ეილა	FL 33		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR D'ASCANIO, FRANCO 431 2ND STREET KEY COLONY BEACH, FL 3305	☐ Delete	TITLE NAME STREET CITY-S	ADDRESS	1150		me Hw/		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	TITLE NAME STREET CITY-S	ADDRESS				(Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	ADORESS T-ZIP				(Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY-S		,				Change	Addition	
 11. I hereby of indicated 	certify that the information supplied with on this report is true and accurate and	this filing does not qualify for hat my signature shall have t	the exem	ption state legal effect	ed in Sect	tion 119.07(3)(i) ide under oath:	, Florida Statutes. I I that I am a managi	urther certify	y that the ir	iformation r of the	