


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90018 011 ****50.00

DOCUMENT # M00000002376		
1. Entity Name DIGITAL LATIN AMERICA LLC		

Principal Place of Business 4117 N.W. 124TH AVENUE CORAL SPRINGS, FL 33065	Mailing Address 1150 BISCAYNE BLVD., 1ST FLOOR MIAMI, FL 33132
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01252006 Chg-LLC CR2E083 (11/05)

4. FEI Number 23-3037609	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
G-T CORPORATION-SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		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. I am familiar with, and accept the obligations of registered agent.

Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
Filing Fee is \$50.00 Due by May 1, 2006				Make check payable to Florida Department of State	

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	NAME	STREET ADDRESS	TITLE	NAME	STREET ADDRESS
GRM	DLA HOLDINGS, INC.	4117 N.W. 124TH AVENUE			
		CORAL SPRINGS, FL 33065			
P	BARRETO, ANTONIO	1550 BISCAYNE BLVD., 1ST FLOOR			
		MIAMI, FL 33132			
P	WEAVER-VEST, CHRISTINA	1550 BISCAYNE BLVD., 1ST FLOOR	VP	WEAVER-VEST CHRISTINA	1550 Biscayne Blvd
		MIAMI, FL 33132			MIAMI, FL 33132
VT	PAZ, EZEQUIEL	1550 BISCAYNE BLVD., 1ST FLOOR			
		MIAMI, FL 33132			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 	1/31/06 305 894-2551
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	Date Daytime Phone #