2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

FILED Feb 28, 2006 08:00 AM Secretary of State

DOCUMENT	# M03000003096
1. Entity Name	

DISPLAY INTERNATIONAL, LLC

Principal Place of Business

3000 NW 125 ST. MIAMI, FL 33167 Mailing Address

3000 NW 125 ST. MIAMI, FL 33167



02202006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0230434 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

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		IN THIS SPACE
	named entity submits this statement for the purpose of changin ions of registered agent.	g its registered office or registered agent, or both, in the State of Florida I am familiar with, and accept
SIGNATURE.	Signature, lyped or printed name of registered agent and title it applicable	(NOTE: Registered Agent signature required when remarking) OATE
FI D	iling Fee Is \$50.00 ue by May 1, 2006	Booonagana
9.	MANAGING MEMBERS/MANAGERS	<u>999999451749</u> 03/10/ 0 6-80062-018 50,00
TIPLE NAME STREET ADDRESS GITY-ST-ZIP	MGR LENSI, ALBERTO 3000 NW 125 ST. MIAMI, FL 33167	05\10\00-2002\7\01\8\20\00
TITLE MAME STREET ADDRESS CTTY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TIPLE NAME STREET ADDRESS CHY-ST-DP		
11. I hereby indicated limited lia	certify that the information supplied with this filling does not que on this report is true and accurate and that my signature shall ability company or the receiver or trustee empowered to execut	alify for the exemptions contained in Chapter 119, Florida Statutes, I lurther certify that the information i have the same legal effect as if made under cath; that I am a managing member or manager of the eiths report as required by Chapter 605, Florida Statutes.