

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000053577

Entity Name: DHARMATA BAND LLC

Current Principal Place of Business:

5387 SUNRISE BLVD
DELRAY BEACH, FL 33484

Current Mailing Address:

5387 SUNRISE BLVD
DELRAY BEACH, FL 33484 US

FEI Number: 45-5265962

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHWARTZ, JASON
5387 SUNRISE BLVD
DELRAY BEACH, FL 33484 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|-----------------------------|
| Title | MGR |
| Name | SCHWARTZ, J |
| Address | 5387 SUNRISE BLVD |
| City-State-Zip: | DELRAY BEACH FL 33484 |
| | |
| Title | MGRM |
| Name | SANCHEZ, KEVIN |
| Address | 15639 72ND DRIVE NORTH |
| City-State-Zip: | PALM BEACH GARDENS FL 33418 |

| | |
|-----------------|--------------------------|
| Title | MGRM |
| Name | SHERIDAN, MATTHEW |
| Address | 5387 SUNRISE BLVD |
| City-State-Zip: | DELRAY BEACH FL 33484 |
| | |
| Title | MGRM |
| Name | PROANO, CHRISTOPHER |
| Address | 5019 PALMBROOK CIRCLE |
| City-State-Zip: | WEST PALM BEACH FL 33417 |

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER PROANO

MGRM

04/22/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date