


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 14, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000012993 1. Entity Name MG, L.L.C.	
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Principal Place of Business 3143 N.E. 211TH STREET AVENTURA, FL 33180	Mailing Address 3143 N.E. 211TH STREET AVENTURA, FL 33180
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DO NOT WRITE IN THIS SPACE



01102005No Chg-LLC CR2E083 (10/03)

4. FEI Number 01-0731168	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent DINER, MANUEL ESQ. 141 NE 3RD AVE. SUITE 601 MIAMI, FL 33180	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MINUCHIN, SALMON 3143 NE 211 STREET AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MINUCHIN, RITH 3143 NE 211 STREET AVENTURA, FL 33180
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01/14/05-80007-012 50.00

**DO NOT WRITE
IN THIS SPACE**

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: 	Date X 01-12-05	Daytime Phone # X 305-466 4993
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