


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 31, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000012993**  
 1. Entity Name  
**MG, L.L.C.**



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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01122006 No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

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**

4. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

**Filing Fee is \$50.00  
 Due by May 1, 2006**

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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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000412487  
 02/10/06-80048-022 50.00

**DO NOT WRITE IN THIS SPACE**

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:  DATE: 01-25-06 Daytime Phone # \_\_\_\_\_