

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029137

Entity Name: M.C.V. ENTERPRISE L.L.C.

FILED
Feb 03, 2010
Secretary of State

Current Principal Place of Business:

1800 N.E. 14TH STREET, #2011
NORTH MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD., #1050
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 02-0650996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLA., INC.
2121 PONCE DE LEON BLVD., #1050
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SALAZAR, MILDRED
Address: 1800 N.E. 14TH STREET, #2011
City-St-Zip: NORTH MIAMI, FL 33181

Title: MGRM
Name: SALAZAR, VALERY M
Address: 1800 N.E. 14TH STREET, #2011
City-St-Zip: NORTH MIAMI, FL 33181

Title: MGRM
Name: SALAZAR, CATHERYN
Address: 1800 N.E. 14TH STREET, #2011
City-St-Zip: NORTH MIAMI, FL 33181

Title: MGR
Name: GARCIA, ANTONIO
Address: 2121 PONCE DE LEON BLVD. #1050
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information indicated on this 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.

SIGNATURE: MILDRED SALAZAR

MGRM

02/03/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date