

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000017637

1. Entity Name
M2K, LLC



Principal Place of Business

13790 NW 4TH STREET, SUITE 113
SUNRISE, FL 33325

Mailing Address

13790 NW 4TH STREET, SUITE 113
SUNRISE, FL 33325

FILED

06 MAY 16 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02072006No Chg-LLC

CR2E083 (11/05)

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4. FEI Number

20-1621551

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZEDECK, LEONARD E ESQ.
13790 NW 4TH STREET, SUITE 113
SUNRISE, FL 33325

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

400075484294
05/31/06--01010--001 **2550.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ZEDECK, LEONARD E
13790 NW 4 ST, # 113
SUNRISE, FL 33325

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5/1/23

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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:

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

LEONARD E ZEDECK

Date

Daytime Phone #