2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2006
Secretary of State

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Entity Name: M.E.P. LABOR MANAGEMENT GROUP LLC

Current Principal Place of Business:

10303 CASA PALARMO DR. #4
RIVERVIEW, FL 33569

New Principal Place of Business:

9904 BREWSTER PARK DRIVE
301
RIVERVIEW, FL 33569

Current Mailing Address:

10303 CASA PALARMO DR. #4
RIVERVIEW, FL 33569

New Mailing Address:

9904 BREWSTER PARK DRIVE
301
RIVERVIEW, FL 33569

FEI Number: 26-0097559 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BORIA, ISAAC
10303 CASA PALARMO DR. #4
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

BORIA, ISAAC
9904 BREWSTER PARK DRIVE
301
RIVERVIEW, FL 33569 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: ISAAC BORIA 04/05/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BORIA, ISAAC
Address: 10303 CASA PALARMO DR. #4
City-St-Zip: RIVERVIEW, FL 33569

Title: MGRM (X) Delete
Name: ARREDONDO, LUIS
Address: 10512 SALIBURY ST.
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BORIA, ISAAC
Address: 9904 BREWSTER PARK DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: ISAAC BORIA MGRM 04/05/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date