

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108963

FILED
Jan 25, 2006
Secretary of State

Entity Name: M.L.M. INVESTMENT GROUP, L.L.C.

Current Principal Place of Business:

1697 PASSION VINE CIRCLE
WESTON, FL 33326 US

New Principal Place of Business:

5731 N.W. 112TH CT
DORAL, FL 33178 US

Current Mailing Address:

1697 PASSION VINE CIRCLE
WESTON, FL 33326 US

New Mailing Address:

5731 N.W. 112TH CT
DORAL, FL 33178 US

FEI Number: 20-3840509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARRERO, GLORIA
1697 PASSION VINE CIRCLE
WESTON, FL 33326 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 () Delete
Name: DEL VALLE RODRIGUEZ, MARIED
Address: 1697 PASSION VINE CIRCLE
City-St-Zip: WESTON, FL 33326 US

Title: MGRM () Delete
Name: SILVA, LUIS MIGUEL
Address: 1697 PASSION VINE CIRCLE
City-St-Zip: WESTON, FL 33326 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DEL VALLE RODRIGUEZ, MARIED
Address: 5731 N.W. 112TH CT
City-St-Zip: DORAL, FL 33178 US

Title: MGRM (X) Change () Addition
Name: SILVA, LUIS MIGUEL
Address: 5731 N.W. 112TH CT
City-St-Zip: DORAL, FL 33178 US

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: MARIED RODRIGUEZ

MGRM

01/25/2006

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