


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000063909		
1. Entity Name MLM INVESTMENTS, LLC		

Principal Place of Business 1110 BRICKELL AVE., SUITE 400 MIAMI, FL 33131	Mailing Address 1110 BRICKELL AVE., SUITE 400 MIAMI, FL 33131
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent  DUEKAPPA D & D INC. 12940 S.W. 133 COURT, SUITE E MIAMI, FL 33186	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 13230 Sw 144 Terrace City Miami FL Zip Code 33186	
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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 <i>Tommy Horouchi</i>	DATE 01-12-2006

Filing Fee is \$50.00 Due by May 1, 2006	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 1110 BRICKELL OFFICE LLC 1331 BRICKELL BAY DRIVE, SUITE 3103 MIAMI, FL 33131 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DUEKAPPA D & D INC. 12940 S.W. 133 COURT, SUITE E MIAMI, FL 33186 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAGOKORO CORP. 213 SE 1 ST MIAMI, FL 33131 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

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: <i>Tommy Horouchi</i>	DATE: 01-12-2006

FILED  
2006 JAN 13 AM 10:17  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

01122006 Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3071789 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13230 Sw 144 Terrace Miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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