2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

Sep 20, 2004 8:00 am Secretary of State 09-20-2004 90096 010 ****50.00 **DOCUMENT # L00000000661** MG INTERNATIONAL INVESTMENTS, L.L.C. **2400010**0 Principal Place of Business Mailing Address 211 EAST INTERNATIONAL SPEEDWAY BLVD. 211 EAST INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32118 DAYTONA BEACH, FL 32118 3. Mailing Address 100 CA CoS 14 2. Principal Place of Business Sets fasse Suite, Apt. #, etc. Suite, Apt. #, etc. 08262004 Chg-LLC CR2E083 (10/03) 100 City & State 4..FEI Number- -Applied For KNNA 59-3631335 Not Applicable Country A \$5.00 Additional 5. Certificate of Status Desired 1040 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMON, URSULA Street Address (P.O. Box Number is Not Acceptable) 211 E INT'L SPEEDWAY BLVD., #213 DAYTONA BEACH, FL 32118 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$50.00 Due by September 8, 2004 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRD TITLE ☐ Delete TITLE Change | ☐ Addition SEISGASSE #9 VIENNA, AUSTRIA SCHMITZ, MICHAEL NAME NAME STREET ADDRESS 211-EAST INTERNATIONAL SPEEDWAY BEVD. STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32118 CITY-ST-ZIP MGRD ☐ Addition TITLE ☐ Delete Change SCHMITZ, MANGOT NAME NAME 244 EAST INTERNATIONAL SPEEDWAY BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZiP-DAYTONA BEACH, FL 32118 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of the receiver a trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Nate

Daytime Phone #

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

FILED