


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 22, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000005435 1. Entity Name FG 2200, LLC	
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Principal Place of Business 1840 N. COMMERCE PKWY #3 WESTON, FL 33326	Mailing Address C/O DANIEL MENDICINO 5709 COURTLAND PLACE ALEXANDRIA, LA 71301
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03082005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1018581	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

MENDICINO, DANIEL 1840 N COMMERCE PKWY #3 FORT LAUDERDALE, FL 33326

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 _____	3/16/05	DATE
<small>Signature, typed or printed name of registered agent and title if applicable.</small>	<small>(NOTE: Registered Agent signature required when reinstating)</small>	

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MENDICINO, DANIEL 5709 COURTLAND PLACE ALEXANDRIA, LA 71301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM REX, ALBERT 2805 HACKNEY ROAD WESTON, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>000000212433 03/22/05-80005-004 \$0.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: <i>Daniel Mendicino</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<i>DANIEL MENDICINO</i>	<i>3-16-05</i> <small>Date</small>	<i>561-239-0126</i> <small>Daytime Phone #</small>
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