

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005211

Entity Name: MKB PROPERTIES, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

10102 SW 60 AVE
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

PO BOX 565606
MIAMI, FL 33256

New Mailing Address:

FEI Number: 59-3717155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, WILLIAM T III
10102 SW 60 AVE
MIAMI, FL 33156 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: BROWN, MAUREEN E
Address: 6741 SW 128 STREET
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Delete
Name: BROWN, KATHLEEN
Address: 6741 SW 128 STREET
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Delete
Name: BROWN, WILLIAM T III
Address: 10101 SW 50 AVENUE
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Delete
Name: ELIZABETH, BROWN
Address: 6401 SW 84 ST
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM BROWN

MGR

04/29/2009

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