

2007

## ANNUAL REPORT

**FILED**  
**May 10, 2007 8:00 am**  
**Secretary of State**

05-10-2007 90423 018 \*\*\*\*50.00

DOCUMENT LO 1000006793

1. Entity Name

MMB INTERNATIONAL LLC



Principal Place of Business

7519 NW 113 CT  
MIAMI FL 33178

Mailing Address

7519 NW 113 CT  
MIAMI FL 33178

60050701



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

05012007

Chg-P

CR2E034 (12/06)

4. FEI Number

65-1099191

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

A. DAY CENFUEBOS CPA  
3270 SW 17 ST  
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 the obligations of registered agent.

SIGNATURE

A. DAY CENFUEBOS CPA

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 HORM MEYER GUILLERMO M  
 7519 NW 113 CT  
 MIAMI FL 33178 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 HORM MEYER GUILLERMO M  
 7519 NW 113 CT  
 MIAMI FL 33178 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 BELTY AMRAN M  
 7503 NW 113 COURT  
 MIAMI FL 33178 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
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☐ Change ☐ Addition

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Guillermo Meyer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/01/07

Date

(305)

Daytime Phone #