2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Mar 27, 2006 08:00 AM Secretary of State

DOCUMENT # L01000017644

1. Entity Name

MJ PENN MANAGEMENT, LLC



Principal Place of Business

Mailing Address

1601 BELVEDERE ROAD SUITE 407 1601 BELVEDERE ROAD

WEST PALM BEACH, FL 33406 US

SUITE 407 WEST PALM BEACH, FL 33406

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01202U08 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1145480 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MEYER, WILLIAM A 1601 BELVEDERE ROAD SUITE 407 WEST PALM BEACH, FL 33406

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The above named entity submits this statement for the purpose of ci the obligations of registered agent.	ranging its registered office or registered agent, or both, in the State of Florida. I am lamiliar with, and accept	pt
	2	
SiGNATURE Signature broad or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating) DATE	

Filing Fee is \$50.00 Due by May 1, 2006

8.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEYER, WILLIAM A 1601 BELVEDERE RD STE 4075 WEST PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	

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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 occurate and that mylsignature shell have the same legal effect as if made under eath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

William

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

Date Daytime Phone #

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