

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018113

Entity Name: MONIN HOLDINGS, LLC

FILED
Feb 07, 2005
Secretary of State

Current Principal Place of Business:

1661 N HIATUS RD
PEMBROKE PINES, FL 33026

New Principal Place of Business:

911 MONTICELLO AVE
DAVIE, FL 33325

Current Mailing Address:

1661 N HIATUS RD
PEMBROKE PINES, FL 33026

New Mailing Address:

911 MONTICELLO AVE
DAVIE, FL 33325

FEI Number: 65-1148340

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYON, MARK
1661 N HIATUS
PENBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

LYON, MARK RA
911 MONTICELLO AVE
DAVIE, FL 33325 US

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: MARK LYON

02/07/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: PS () Delete
Name: LYON, MARK
Address: 1661 N HIATUS RD
City-St-Zip: HOLLYWOOD, FL 33026

Title: VP () Delete
Name: LEON, RAMONITA
Address: 1661 N HIATUS RD
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LYON, MARK
Address: 911 MONTICELLO AVE
City-St-Zip: DAVIE, FL 33325

Title: MGRM (X) Change () Addition
Name: LEON, RAMONITA
Address: 911 MONTICELLO AVE
City-St-Zip: DAVIE, FL 33325

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK LYON

MGRM

02/07/2005

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