

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L02000003354

1. Entity Name
MACRO-MONEY CONCEPTS, LLC



Principal Place of Business
**6102 SE FEDERAL HIGHWAY
STUART, FL 34997**

Mailing Address
**6102 SE FEDERAL HIGHWAY
STUART, FL 34997**

FILED
May 25, 2005 08:00 AM
Secretary of State



01102005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
05-0567345

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CZAJKA, CHARLES J
6102 SE FEDERAL HIGHWAY
STUART, FL 34997**

**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:

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

(NOTE: Registered Agent signature required when reinstalling)

1/31/05
DATE

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

**U000000368275
05/25/05-80006-001 55.00**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
CZAJKA, CHARLES J
6102 SE FEDERAL HIGHWAY
STUART, FL 34997**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

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

Date

1/31/05

Daytime Phone #