

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013345

FILED  
Mar 19, 2005  
Secretary of State

Entity Name: MSM ENTERPRISE L.L.C.

**Current Principal Place of Business:**

5887 NW 79 WAY  
PARKLAND, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

5887 NW 79 WAY  
PARKLAND, FL 33067

**New Mailing Address:**

FEI Number: 02-0609970

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIXON, ALEXANDRE  
2800 W OAKLAND PARK BLVD #107  
OAKLAND PARK, FL 33311 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: MARTELLY, LESLY  
Address: 5887 NW 79 WAY  
City-St-Zip: PARKLAND, FL 33067

Title: MGR ( ) Delete  
Name: SALVANT, ERNST  
Address: 8640 NW 32ND ST.  
City-St-Zip: PARKLAND, FL 33065

Title: MGR (X) Delete  
Name: MARTELLY, NORA  
Address: 5887 NW 79 WAY  
City-St-Zip: PARKLAND, FL 33067

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: MARTELLY, NORA  
Address: 5887 NW 79 WAY  
City-St-Zip: PARKLAND, FL 33067

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

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: NORA MARTELLY

MGR

03/19/2005

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