2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000019395

1. Entity Name
MC LABEL L.L.C.

Principal Place of Business	Mailing Address
2225 N.W. 97TH AVE. MIAMI, FL 33172	2225 N.W. 97TH AVE. MIAMI, FL 33172

DO NOT WRITE IN THIS SPACE

01062005No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
11-3646020	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

WEINTRAUB, NICOLAS
3025 NE 190TH ST #103
AVENTURA, FL 33180

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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 Title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	CRESPI, DANNY
STREET ADDRESS	2225 N.W. 97TH AVE.
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	MGR
NAME	WEINTRAUB, NICOLAS
STREET ADDRESS	2225 N.W. 97TH AVE.
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000299453
04/11/05-80109-U11 50.00

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: _____   04-11-05   (305) 436-9692

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #