


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000024504	
1. Entity Name M & G INVESTMENTS, LLC	

Principal Place of Business 13000 N.W. 45TH AVENUE OPA LOCKA, FL 33054	Mailing Address 13000 N.W. 45TH AVENUE OPA LOCKA, FL 33054
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04212004 No Chg-LLC CR2E083 (10/03)

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4. FEI Number 27-0039415	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MOABERY, ABDOL
 13000 N.W. 45TH AVENUE
 OPA LOCKA, FL 33054

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2004

U00000125721
 04/23/04-80006-004 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GA TELESIS HOLDINGS, INC. 13000 NW 45TH AVENUE OPA LOCKA, FL 33054
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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: *Abdol Moabery* ABDOL MOABERY 4/21/04 (305) 769-5992
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #