

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 15, 2006 8:00 am
Secretary of State

04-24-2006 90061 013 ****50.00

DOCUMENT # L02000027280

1. Entity Name
MCM INVESTMENTS, LLC



Principal Place of Business
**20750 W. DIXIE HIGHWAY
NO. MIAMI BEACH, FL 33180 US**

Mailing Address
**20750 W. DIXIE HIGHWAY
NO. MIAMI BEACH, FL 33180 US**

30008444



DO NOT WRITE IN THIS SPACE

01062006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 32-0043328	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**LEOPOLD, KORN & LEOPOLD, P.A.
20801 BISCAYNE BOULEVARD
SUITE 501
AVENTURA, FL 33180**

**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 reappointing)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOLDRING, MAURICIO 20750 W. DIXIE HIGHWAY NO. MIAMI BEACH, FL 33180
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOLDRING, CLARA DIANA 20750 W DIXIE HWY N MIAMI BEACH, FL 33180
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

CLARA DIANA GOLDRING 05/09/2006 305 933 9334

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

Date

Daytime Phone #