


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 07, 2004 8:00 am
Secretary of State

05-07-2004 90006 002 ****55.00

DOCUMENT # L03000005740 1. Entity Name M.R. INTERNATIONAL GROUP, LLC					
Principal Place of Business 3700 FIFTH AVENUE NORTH ST. PETERSBURG, FL 33713			Mailing Address 3700 FIFTH AVENUE NORTH ST. PETERSBURG, FL 33713		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 5408 St James Dr Suite, Apt. #, etc.			
City & State 		City & State New Port Richey, FL		4. FEI Number 65-1175898	
Zip 		Zip 34652		Country USA	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent RUSIECKI, MAREK 3700 FIFTH AVENUE NORTH ST. PETERSBURG, FL 33713			7. Name and Address of New Registered Agent Name Kelly Drew Street Address (P.O. Box Number is Not Acceptable) 5408 St James Drive City New Port Richey FL Zip Code 34652		
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 <u>Kelly L Drew</u> <u>Kelly L Drew, Accountant</u> <u>4-19-04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUSIECKI, MAREK 3700 FIFTH AVENUE NORTH ST. PETERSBURG, FL 33713	<input type="checkbox"/> Delete			
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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: <u>Marek Rusiecki</u> <u>4-21-04</u> <u>727-328-0263</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					