

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State

04-30-2004 90068 033 ****50.00

DOCUMENT # L03000011565

1. Entity Name
M.G.M.R. ENTERPRISES, L.L.C.



Principal Place of Business
2550 EISENHOWER BOULEVARD
FORT LAUDERDALE, FL 33316

Mailing Address
PO BOX 639
FORT LAUDERDALE, FL 33302

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04222004

Chg-LLC

CR2E083 (10/03)

4. FEI Number

33-1052851

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional

Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JACKSON, ROBERT I
2550 EISENHOWER BOULEVARD
FORT LAUDERDALE, FL 33316

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reappointing)

DATE

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **MGRM**
STREET ADDRESS **MICHAEL J. CUNNINGHAM**
CITY-ST-ZIP **2550 EISENHOWER BLVD.**
FORT LAUDERDALE, FL 33316

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **MGRM**
STREET ADDRESS **GEORGE H. WINSLOW**
CITY-ST-ZIP **2550 EISENHOWER BLVD.**
FORT LAUDERDALE, FL 33316

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **MGRM**
STREET ADDRESS **MARK C. PATTERSON**
CITY-ST-ZIP **2550 EISENHOWER BLVD.**
FORT LAUDERDALE, FL 33316

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **MGRM**
STREET ADDRESS **ROBERT E. JACKSON**
CITY-ST-ZIP **2550 EISENHOWER BLVD.**
FORT LAUDERDALE, FL 33316

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Michael J. Cunningham / **Michael J. Cunningham**

4/26/04 954-868-8277

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

Date

Daytime Phone #