2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000012938

1. Entity Name
BRYANT, MISA, MABIE GROUP, LLC

Principal Place of Business	Mailing Address
1007 W. CLEVELAND STREET TAMPA, FL 33606	1007 W. CLEVELAND STREET TAMPA, FL 33606

DO NOT WRITE IN THIS SPACE

04272007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
04-3750552	Not Applicable

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

6. Name and Address of Current Registered Agent

BRYANT, JOSEPH R
1007 W. CLEVELAND STREET
TAMPA, FL 33606

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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, 2007

U000000756827
05/23/07-80045-021   50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	BRYANT, JOSEPH R
STREET ADDRESS	1007 W. CLEVELAND ST.
CITY-ST-ZIP	TAMPA, FL 33606
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____   4/27/07 813 769 0328

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