

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015083

Entity Name: MRA ONE, LLC

FILED  
Jul 12, 2006  
Secretary of State

**Current Principal Place of Business:**

3641 PARK LANE  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

3641 PARK LANE  
COCONUT GROVE, FL 33133

**New Mailing Address:**

FEI Number: 56-2351442      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

APPLEBAUM, MICHAEL E  
3641 PARK LANE  
COCONUT GROVE, FL 33133      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: P      ( ) Delete  
Name: APPLEBAUM, MICHAEL E  
Address: 3641 PARK LANE  
City-St-Zip: COCONUT GROVE, FL 33133

Title: EVP      ( ) Delete  
Name: APPLEBAUM, RANDI H  
Address: 3641 PARK LANE  
City-St-Zip: COCONUT GROVE, FL 33133

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 APPLEBAUM

P

07/12/2006

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date