

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019838

FILED
Mar 10, 2009
Secretary of State

Entity Name: MOUNT ROYAL REALTY GROUP VI LLC

Current Principal Place of Business:

1756 SW 8TH STREET
MIAMI, FL 33135

New Principal Place of Business:

1920 E HALLANDALE BEACH BLVD
808
HALLANDALE, FL 33009

Current Mailing Address:

1756 SW 8TH STREET
201
MIAMI, FL 33135

New Mailing Address:

1920 E HALLANDALE BEACH BLVD
808
HALLANDALE, FL 33009

FEI Number: 55-0844079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERSTEIN, BARRY D ESQ
2999 NE 191 ST, STE 704
AVENTURA, FL 33180 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: MGR () Delete
Name: FENIX WORLDWIDE CORP,
Address: 1756 SW 8TH ST.
City-St-Zip: MIAMI, FL 33135

Title: MGR () Delete
Name: WIZNITZER, DAVID
Address: 1756 SW 8TH STREET
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FENIX WORLDWIDE CORP,
Address: 1920 E HALLANDALE BEACH BLVD
City-St-Zip: HALLANDALE, FL 33009

Title: MGR (X) Change () Addition
Name: WIZNITZER, DAVID
Address: 1920 E HALLANDALE BEACH BLVD
City-St-Zip: MIAMI, FL 33009

I hereby certify that the information supplied with this filing does not qualify 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: DAVID WIZNITZER

MR

03/10/2009

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