


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 05, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000021237 1. Entity Name MARAMY LLC	
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Principal Place of Business 1352 NE 163RD STREET NORTH MIAMI BEACH, FL 33162	Mailing Address 1352 NE 163RD STREET NORTH MIAMI BEACH, FL 33162
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DO NOT WRITE IN THIS SPACE



02162007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0040081	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CIVIL TRIAL PRACTICE, PA 152 NE 167TH STREET #300 N. MIAMI, FL 33162

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

U00000654715
03/13/07-80073-008 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM A & M PROPERTIES, INC. 1352 NE 163 STREET NORTH MIAMI BEACH, FL 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ELITE HOLDINGS GROUP X LLC 152 NE 167TH STREET # 300 MIAMI, FL 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PRIME HOLDINGS, LLC 1877 S. FEDERAL HIGHWAY SUITE 110 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE 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: <u>David Aelion</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	<u>2/22/07</u> Date	<u>3/944-4424</u> Daytime Phone #