

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029433

Entity Name: MSM INVESTMENTS LLC

FILED
Jan 07, 2005
Secretary of State

Current Principal Place of Business:

36 N.E. 1ST ST, STE. 701
MIAMI, FL 33132

New Principal Place of Business:

36 N.E. 1ST ST, STE.
1018
MIAMI, FL 33132

Current Mailing Address:

36 N.E. 1ST ST, STE. 701
MIAMI, FL 33132

New Mailing Address:

36 N.E. 1ST ST, STE.
1018
MIAMI, FL 33132

FEI Number: 56-2396103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRAI, ERAN
36 N.E. 1ST ST, STE. 701
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

FRAI, ERAN
36 N.E. 1ST ST, STE.
1018
MIAMI, FL 33132 US

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: ERAN FRAI

01/07/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: FRAI, ERAN
Address: 36 N.E. 1ST ST, STE. 701
City-St-Zip: MIAMI, FL 33132

Title: MGRM () Delete
Name: FRAI, ELIZABETH
Address: 36 N.E. 1ST ST, STE. 701
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FRAI, ERAN
Address: 36 N.E. 1ST ST, STE. 1018
City-St-Zip: MIAMI, FL 33132

Title: MGRM (X) Change () Addition
Name: FRAI, ELIZABETH
Address: 36 N.E. 1ST ST, STE. 1018
City-St-Zip: MIAMI, FL 33132

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ERAN FRAI

MR

01/07/2005

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