

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033879

Entity Name: MICHAEL CONSTRUCTION, LLC

FILED
Mar 14, 2006
Secretary of State

Current Principal Place of Business:

641 INLET ROAD
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

14255 US HIGHWAY 1
LOGGERHEAD PLAZA SUITE 229
JUNO BEACH, FL 33408

Current Mailing Address:

641 INLET ROAD
NORTH PALM BEACH, FL 33408

New Mailing Address:

300 COLFAX AVENUE
CLIFTON, NJ 07013

FEI Number: 54-2125478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRANK, MITCHELL
641 INLET ROAD
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

TODD, MORICI
14255 US HIGHWAY 1
LOGGERHEAD PLAZA SUITE 229
JUNO BEACH, FL 33408 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: TODD MORICI

03/14/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FRANK, MITCHELL S CEO
Address: 641 INLET RD
City-St-Zip: NORTH PALM BCH, FL 33408

Title: MGR (X) Delete
Name: MORICI, TODD
Address: 300 COLFAX AVE
City-St-Zip: CLIFTON, NJ 07015

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MORICI, TODD A CEO
Address: 300 COLFAX AVE
City-St-Zip: CLIFTON, NJ 07013

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: TODD MORICI

CEO

03/14/2006

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