

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043178

Entity Name: MAG SERVICES, L.L.C.

FILED  
Apr 30, 2009  
Secretary of State

**Current Principal Place of Business:**

8751 N.W 57TH STREET  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

8751 N.W 57TH STREET  
TAMARAC, FL 33321

**New Mailing Address:**

FEI Number: 65-1212222

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INTEGRO MANAGEMENT CORP  
19516 SW 49TH CT  
MIRAMAR, FL 33029 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: ZUNIGA, ANDRES MR  
Address: 5721 SW 59 AVENUE  
City-St-Zip: MIAMI, FL 33143

Title: MGRM ( ) Delete  
Name: MARINO, MARTHA  
Address: 8751 N.W 57TH STREET  
City-St-Zip: MIRAMAR, FL 33321

Title: MGRM (X) Delete  
Name: GOMEZ, MAURICIO  
Address: 19515 SW 49 CT  
City-St-Zip: MIRAMAR, FL 33029

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GOMEZ, MAURICIO  
Address: 19515 SW 49 CT  
City-St-Zip: MIAMI, FL 33029

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 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: MAURICIO

MGRM

04/30/2009

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