

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047173

FILED
Jan 28, 2005
Secretary of State

Entity Name: MMMM, LLC

Current Principal Place of Business:

161 ARAGON AVENUE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

161 ARAGON AVENUE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-0441498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEFFENS, F. MICHAEL
161 ARAGON AVENUE
CORAL GABLES, FL 33134 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/MEMBERS:

Title: P () Delete
Name: STEFFENS, F. MICHAEL
Address: 161 ARAGON AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: VPS () Delete
Name: GOLDMAN, MARJORIE
Address: 161 ARAGON AVE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STEFFENS, F. MICHAEL
Address: 161 ARAGON AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Change () Addition
Name: GOLDMAN, MARJORIE
Address: 161 ARAGON AVE
City-St-Zip: CORAL GABLES, FL 33134

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: F. MICHAEL STEFFENS

MGR

01/28/2005

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