

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000053131	
1. Entity Name MGSS, LLC	
Principal Place of Business 2875 NE 191ST ST, STE 400 AVENTURA, FL 33180	Mailing Address 2875 NE 191ST ST, STE 400 AVENTURA, FL 33180



DO NOT WRITE IN THIS SPACE

01182007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0483038	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PAPADAKIS, JOAN
2875 NE 191ST STREET
SUITE 400
MIAMI, FL 33180

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GORDON, MARK J 2875 NE 191ST ST MIAMI, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STUDNIK, SHANI 2875 NORTHEAST 191ST STREET SUITE 400 AVENTURA, FL 33180
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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

MARK GORDON

04-16-07

Date

305-370-7111

Daytime Phone #