

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000055235

FILED  
Jan 22, 2007  
Secretary of State

Entity Name: MJM CONSTRUCTION, LLC

## Current Principal Place of Business:

4131 LOUIS AVENUE  
#13  
HOLIDAY, FL 34691

## New Principal Place of Business:

641 B AYSHORE DRIVE  
TARPON SPRINGS, FL 34689

## Current Mailing Address:

4131 LOUIS AVENUE  
#13  
HOLIDAY, FL 34691

## New Mailing Address:

PO BOX 417  
TARPON SPRINGS, FL 34688 04

FEI Number: 13-4271285

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GIALOUSIS, RENEE  
4131 LOUIS AVENUE  
#13  
HOLIDAY, FL 34691 US

## Name and Address of New Registered Agent:

MAKRYLLOS, KATERINA  
641 BAYSHORE DRIVE  
TARPON SPRINGS, FL 34689 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: KATERINA MAKRYLLOS

01/22/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete  
Name: GIALOUSIS, RENEE  
Address: 4131 LOUIS AVENUE #13  
City-St-Zip: HOLIDAY, FL 34691

Title: VP ( ) Delete  
Name: KALIKANTZAROS, GEORGE  
Address: 4131 LOUIS AVE #13  
City-St-Zip: HOLIDAY, FL 34691

Title: MGR ( ) Delete  
Name: KALIKANTZAROS, IRENE  
Address: 4131 LOUIS AVE #13  
City-St-Zip: HOLIDAY, FL 34691

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition  
Name: KALIKANTZAROS, GEORGE  
Address: 641 BAYSHORE DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP (X) Change ( ) Addition  
Name: MAKRYLLOS, KATERINA  
Address: 641 BAYSHORE DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: SEC (X) Change ( ) Addition  
Name: MARAKAS, SEVASTI  
Address: 641 BAYSHORE DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MGRM ( ) Change (X) Addition  
Name: KALIKANTZAROS, IRENE  
Address: 641 BAYSHORE DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

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: GEORGE KALIKANTZAROS

P

01/22/2007

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