

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013097

Entity Name: MAGER ENTERPRISES, LLC

FILED
Jun 21, 2005
Secretary of State

Current Principal Place of Business:

401 EAST LAS OLAS BLVD 14TH FLOOR
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

2400 E COMMERCIAL BLVD
10TH FLOOR
FORT LAUDERDALE, FL 33308

Current Mailing Address:

401 EAST LAS OLAS BLVD 14TH FLOOR
FORT LAUDERDALE, FL 33301

New Mailing Address:

2400 E. COMMERCIAL BLVD
10TH FLOOR
FORT LAUDERDALE, FL 33308

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MAGER, SCOTT
401 EAST LAS OLAS BLVD 14TH FLOOR
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

MAGER, SCOTT
921 SE 7TH STREET
FORT LAUDERDALE, FL 33301 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: SCOTT MAGER

06/21/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MAGER, SCOTT
Address: 401 EAST LAS OLAS BLVD 14TH FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MAGER, SCOTT
Address: 2400 E. COMMERCIAL BLVD. 10TH FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33308

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: SCOTT MAGER

MGR

06/21/2005

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