2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000016625

1. Entity Name M.A.G. LLC

Principal Place of Business

12438 WILES ROAD CORAL SPRINGS, FL 33076 US Mailing Address

12438 WILES ROAD CORAL SPRINGS, FL 33076

FILED Feb 13, 2006 08:00 AM Secretary of State



01232006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For 20-0978289 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

Casteria Phone 6

6. Name and Address of Current Registered Agent

SINGER, MICHAEL S ESQ 3801 PGA BOULEVARD SUITE 604 PALM BEACH GARDENS, FL 33410

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8. The above the obligat	named entity submits this statement folions of registered agent.	r the purpose of cha	nging its registered office	or registered agent, or both, in the St	ate of Florida. I am familiar with, and accept
SIGNATURE.	<u></u>				
	Signature, typed or printed name of registered agent	end little if applicable.	(NOTE, Registered Agent sign	natura raquired when reinstating)	DATE
F D	iling Fee is \$50.00 ue by May 1, 2006	1			
9.	MANAGING MEMBE	RS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD D'ATTILE, GREGG 585 NW 108 TERR CORAL GABLES, FL 33076			Upappa (22020)	
TITLE NAME STREET ADDRESS GITY-ST-ZIP	VDST D'ATTILE, T M 5234 NW 109 LANE CORAL SPRINGS, FL 33076	; : :		02/2	₩00000432978 02/23/06-80091-021 50.00
TIFLE NAME STREET ADDRESS CHY-ST-ZIP		,		DO NO	r WRITE
HILE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
TITLE MAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-TIP	,	,			

11. I hereby certify that the information supplied with this filling 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 synhature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 508, Florida Statutes.