

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040716

Entity Name: MTHREE LIVE, LLC

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

1141 SOUTH ROGERS CIRCLE
BOCA RATON, FL 33487

New Principal Place of Business:

120 INTERSTATE NORTH PARKWAY
432
ATLANTA, GA 30339

Current Mailing Address:

1141 SOUTH ROGERS CIRCLE
BOCA RATON, FL 33487

New Mailing Address:

1141 SOUTH ROGERS CIRCLE
2
BOCA RATON, FL 33487

FEI Number: 20-1194894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADY, NAEEM
1141 SOUTH ROGERS CIRCLE
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

MADY, NAEEM
1141 SOUTH ROGERS CIRCLE
2
BOCA RATON, FL 33487 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:

04/26/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: MADY, EDMUND
Address: 1141 SOUTH ROGERS CIRCLE
City-St-Zip: BOCA RATON, FL 33487

Title: MGR () Delete
Name: MADY, NAEEM
Address: 1141 SOUTH ROGERS CIRCLE
City-St-Zip: BOCA RATON, FL 33487

Title: MGR (X) Delete
Name: PRINSLOO, CORNELIUS P III
Address: 6752 VIC AR ROAD
City-St-Zip: ATLANTA, GA 30360

Title: MGR (X) Delete
Name: JANIT, CLIFF IUS G
Address: 6752 VIC AIR ROAD
City-St-Zip: ATLANTA, GA 30360

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHELLE FACCIOLA

CONT

04/26/2005

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