

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056024

Entity Name: MM III, LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

1742 N.E. 37TH STREET
OAKLAND PARK, FL 33334

New Principal Place of Business:

2625 N.E. 37TH STREET
FORT LAUDERDALE, FL 33301

Current Mailing Address:

1742 N.E. 37TH STREET
OAKLAND PARK, FL 33334

New Mailing Address:

3438 N OCEAN BLVD
FORT LAUDERDALE, FL 33308

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: FLOYD, ROBERT D
Address: 1742 N.E. 37TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

Title: MGRM () Delete
Name: ACKERMAN, ERIC
Address: 1742 N.E. 37TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FLOYD, ROBERT D
Address: 2625 N.E. 37TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM (X) Change () Addition
Name: ACKERMAN, ERIC
Address: 2625 N.E. 37TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

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: ERIC ACKERMAN

MGRM

04/29/2005

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