## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Jan 31, 2006 08:00 AM **DOCUMENT # L04000059613 Secretary of State** 1. Entity Name MAJC, L.L.C. Principal Place of Business Mailing Address 13006 BELL CREEK CHASE 13006 BELL CREEK CHASE RIVERVIEW, FL 33569 RIVERVIEW, FL 33569 01232008No Chq-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GASSMAN, ALAN S DO NOT WRITE 1245 COURT STREET SUITE 102 IN THIS SPACE CLEARWATER, FL 33756 3. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, lyped or printed name of registered arrest and title if equilicable (NOTE: Registered Agent signature regulard when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2008 U00000410594 02/09/06-80043-009 50.00 MANAGING MEMBERS/MANAGERS 9. MGR me NAME KALIK, CRAIG 13006 BELLCREEK CHASE STREET ADORESS CITY-ST-ZP RIVERVIEW, FL 33569 TITLE NAME STREET ADDRESS CITY-ST-70 TILE NAUT STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE STREET ADDRESS CITY-ST-ZP TITLE

11. I horeby 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 signature shall have the same legal effect as if made under eath; 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 608, Florida Statutes.

SIGNATURE: ITED NAME OF EXCHING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE AND TYPED OR

STREET ADDRESS CITY-ST-ZP

813-654-8139