2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2006 8:00 am
Secretary of State

01-24-2006 90065 012 ****50.00

DOCUMENT # L04000074712

1. Entity Name
M & M PEMBROKE PINES, LLC

Principal Place of Business	Mailing Address
2441 SW 37TH AVENUE CORAL GABLES, FL 33145	2441 SW 37TH AVENUE CORAL GABLES, FL 33145

DO NOT WRITE IN THIS SPACE

01042006No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-1752848

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. **Name and Address of Current Registered Agent**

TERRY V. HAUSER
444 BRICKELL AVENUE
SUITE 1000
MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

8. 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, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	AIRALA, MANUEL A
STREET ADDRESS	2441 SW 37TH AVENUE
CITY-ST-ZIP	CORAL GABLES, FL 33145
TITLE	MGRM
NAME	AIRALA, MARTA
STREET ADDRESS	2441 SW 37TH AVENUE
CITY-ST-ZIP	CORAL GABLES, FL 33145
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing 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 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: M A Airala 1-13.06 305.442.0066

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #