


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000076102 1. Entity Name M & L HOLDINGS, LLC	
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Principal Place of Business 1157 N W 159 DR MIAMI, FL 33169	Mailing Address 1157 N W 159 DR MIAMI, FL 33169
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DO NOT WRITE IN THIS SPACE



02142006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1798318	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent MONTESI, M. SILVIO 1157 N W 159 DR MIAMI, FL 33169
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**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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____
Signature, typed or printed name of registered agent and title if applicable

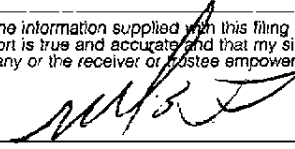
**Filing Fee Is \$50.00
Due by May 1, 2006**

110000438604
03/01/06-80012-014 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MONTESI, M. SILVIO 1157 N W 159 DR MIAMI, FL 33169
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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:  **MICHAEL SILVIO MONTESI** **02/14/06** **305-620-4075 ext**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #