## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Feb 24, 2006 08:00 AM **Secretary of State**

1. Entity Name
MEI'S INVESTMENT, LLC



Principal Place of Business

12363 88TH PLACE NORTH WEST PALM BEACH, FL 33412 Mailing Address

12363 88TH PLACE NORTH WEST PALM BEACH, FL 33412



## DO NOT WRITE IN THIS SPACE

02062006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1865341

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MEI, RONG Z

## DO NOT WRITE

12303 001	IT PLACE NORTH	1		
VEST PALM BEACH, FL 33412		IN	IN THIS SPACE	
	named entity submits this statement for the purpose of chairons of registered agent.	nging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title it applicable	(NOTE Registered Agent signature required when reinstating)	DATE	
Fi D	iling Fee is \$50.00 ue by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEI, RONG Z 12363 88TH PLACE NORTH WEST PALM BEACH, FL 3341Z			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEI, FENG M 12363 88TH PLACE NORTH WEST PALM BEACH, FL 33412		HN8000445591 U3/U7/06-80052-822-50.00	
I(ITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET AUDRESS CITY-ST-ZIP		IN	THIS SPACE	
name Street address City-St-Zip				
TITLE	ļ	3		

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 eath; that I am a managing member or manager of the limited liability company or the receiver or trustee effipowered to execute this report as required by Chapter 508, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING HEMBER, OR AUTHORIZED REPREDENTATIVE