


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000086494 1. Entity Name METTA MANAGEMENT, LLC	
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Principal Place of Business C/O ADAMS & ADAMS, P.A. 540 BILTMORE WAY CORAL GABLES, FL 33134	Mailing Address C/O ADAMS & ADAMS, P.A. 540 BILTMORE WAY CORAL GABLES, FL 33134
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01052007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1849072	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 ADAMS, JOHN C ESQ. C/O ADAMS & ADAMS, P.A. 540 BILTMORE WAY CORAL GABLES, FL 33134

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, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HILDEBRAND, DAVID 540 BILTMORE WAY CORAL GABLES, FL 33134
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<p>U00000670188 03/27/07-80102-007 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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: David Hildebrand **David Hildebrand** 3/7/07 314-412-6732
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #