

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008497

FILED
Apr 28, 2006
Secretary of State

Entity Name: MECCA INTERNATIONAL LLC

Current Principal Place of Business:

18370 MEDITERRANEAN BLVD
#2508
MIAMI, FL 33015 US

New Principal Place of Business:

8951 NW 7 CT
PEMBROKE PINES, FL 33024 US

Current Mailing Address:

18370 MEDITERRANEAN BLVD
#2508
MIAMI, FL 33015 US

New Mailing Address:

8951 NW 7 CT
PEMBROKE PINES, FL 33024 US

FEI Number: 42-1658720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CACERES, STEVE
18370 MEDITERRANEAN BLVD
#2508
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

CACERES, STEVE
8951 NW 7 CT
PEMBROKE PINES, FL 33024 US

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.

SIGNATURE:

04/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SOLOGNIER-CACERES, NATALINE
Address: 18370 MEDITERRANEAN BLVD #2508
City-St-Zip: MIAMI, FL 33015 US

Title: MGR (X) Delete
Name: CACERES, STEVE
Address: 18370 MEDITERRANEAN BLVD #2508
City-St-Zip: MIAMI, FL 33015 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CACERES, STEVE
Address: 8951 NW 7 CT
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: STEVE CACERES

MGR

04/28/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date