

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013172

FILED
Feb 05, 2007
Secretary of State

Entity Name: MOH INVESTMENT GROUP LLC

Current Principal Place of Business:

3989 SW 141 AVENUE
DAVIE, FL 33330

New Principal Place of Business:

Current Mailing Address:

3989 SW 141 AVENUE
DAVIE, FL 33330

New Mailing Address:

FEI Number: 74-3175801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOH, SALLY
3989 SW 141 AVENUE
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MOH, SALLY
Address: 3989 SW 141 AVENUE
City-St-Zip: DAVIE, FL 33330

Title: MGR () Delete
Name: MOH, MATTHEW
Address: 3989 SW 141 AVE
City-St-Zip: DAVIE, FL 33330

Title: S () Delete
Name: MOH, GEORGE
Address: 3989 SW 191 AVE
City-St-Zip: DAVIE, FL 33330

Title: T () Delete
Name: MOH, MICHAEL
Address: 15624 SW 52 CT
City-St-Zip: MIRAMAR, FL 33027

Title: S () Delete
Name: MOH, JOHN
Address: 3989 SW 191 AVE
City-St-Zip: DAVIE, FL 33330

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: MOH, WILLIAM
Address: 3989 SW 141 AVE
City-St-Zip: DAVIE, FL 33330

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

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

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: SALLY MOH

MGR

02/05/2007

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