


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000024744 1. Entity Name MJMRBM, LLC	
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Principal Place of Business 6105 - G MEMORIAL HIGHWAY TAMPA, FL 33615	Mailing Address 6105 - G MEMORIAL HIGHWAY TAMPA, FL 33615
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DO NOT WRITE IN THIS SPACE



04152008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-2710291

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

O'MALLEY, ANDREW M
C/O CAREY, O'MALLEY, ET AL
721 SOUTH OREGON AVE.
TAMPA, FL 33606

**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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000907455
05/05/08-80039-003 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MAESTRELLI, RICHARD B 6105 - G MEMORIAL HIGHWAY TAMPA, FL 33615
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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:  **4/15/08** **(813) 882-9000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #