

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000033684

Entity Name: MAB & MCP FIRST, LLC.

FILED
Mar 24, 2008
Secretary of State

Current Principal Place of Business:

11640 COURT OF PALMS
#102
FORT MYERS, FL 33908

Current Mailing Address:

11640 COURT OF PALMS
#102
FORT MYERS, FL 33908

New Principal Place of Business:

11640 COURT OF PALMS
BUILDING 102
FORT MYERS, FL 33908

New Mailing Address:

11640 COURT OF PALMS
BUILDING 102
FORT MYERS, FL 33908

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PIGNATTA, MARCELO C
11640 COURT OF PALMS
#102
FORT MYERS, FL, FL 33908 US

Name and Address of New Registered Agent:

PIGNATTA, MARCELO C
11640 COURT OF PALMS
BUILDING 102
FORT MYERS, FL, FL 33908 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: MARCELO PIGNATTA

03/24/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PIGNATTA, MARCELO C
Address: 11640 COURT OF PALMS #102
City-St-Zip: FORT MYERS, FL 33908 65

Title: MGR () Delete
Name: BRUUN, MARIO A
Address: 11640 COURT OF PALMS #102
City-St-Zip: FORT MYERS, FL 33908 65

ADDITIONS/CHANGES:

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 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: MARCELO PIGNATTA

MGR

03/24/2008

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