2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000041272

1. Entity Name

MECEPA PROPERTY INVESTMENTS 2, LL



FILED Apr 04, 2007 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

941 GULFSTREAM COURT WESTON, FL 33327 941 GULFSTREAM COURT WESTON, FL 33327



03302007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-2803332		Not Applicable
5. Certificate of Status Desired	\$5.00 Fee Re	Additional

6. Name and Address of Current Registered Agent

ABED, MARY LEIGH 941 GULFSTREAM COURT WESTON, FL 33327

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SIGNATURE.	Signature, typed or printed name of registered agent and tills if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
FI D	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ABED, EDUARDO J 941 GULFSTREAM COURT WESTON, FL 33327		Managaaree	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ABED, MARY LEIGH 941 GULFSTREAM COURT WESTON, FL 33327		U00000689666 04/11/07-80044-024 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filling 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.				

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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