

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000041886

FILED
Jun 04, 2008
Secretary of State

Entity Name: MEANAGER, LLC

Current Principal Place of Business:

2708 NE 35TH DRIVE
FT. LAUDERDALE, FL 33308

New Principal Place of Business:

409 N. VICTORIA PARK ROAD
FT. LAUDERDALE, FL 33301

Current Mailing Address:

2708 NE 35TH DRIVE
FT. LAUDERDALE, FL 33308

New Mailing Address:

409 N. VICTORIA PARK ROAD
FT. LAUDERDALE, FL 33301

FEI Number: 20-4352589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOVANOVIH, NICK
350 EAST LAS OLAS BOULEVARD, SUITE 1000
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

KNAPPER, MANDY
409 N. VICTORIA PARK ROAD
FT. LAUDERDALE, FL 33301 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: MANDY KNAPPER

06/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JOVANOVIH, NICK
Address: 2708 NE 35TH DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: MGR (X) Delete
Name: KNAPPER, MANDY
Address: 1838 NW 97TH AVENUE
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KNAPPER, MANDY
Address: 409 N. VICTORIA PARK ROAD
City-St-Zip: FT. LAUDERDALE, FL 33301

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: MANDY KNAPPER

MGR

06/04/2008

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