

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000042535

Entity Name: MEFK SERVICE LLC

FILED
Jan 20, 2006
Secretary of State

Current Principal Place of Business:

17620 NW 73 AV #204
MIAMI, FL 33015

New Principal Place of Business:

8049 SW 118 CT
MIAMI, FL 33183

Current Mailing Address:

17620 NW 73 AV #204
MIAMI, FL 33015

New Mailing Address:

8049 SW 118 CT
MIAMI, FL 33183

FEI Number: 20-2764890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KANNEE, LUIS
17620 NW 73 AV #204
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

KANNEE, LUIS
8049 SW 118 CT
MIAMI, FL 33183 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: MARTA KANNEE

01/20/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: KANNEE, MARTA
Address: 17620 NW 73 AV #204
City-St-Zip: MIAMI, FL 33015

Title: SEC () Delete
Name: KANNEE, LUIS
Address: 17620 NW 73 AV #204
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: KANNEE, MARTA
Address: 8049 SW 118 CT
City-St-Zip: MIAMI, FL 33183

Title: SEC (X) Change () Addition
Name: KANNEE, LUIS
Address: 8049 SW 118 CT
City-St-Zip: MIAMI, FL 33183

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: MARTA KANNEE

PRES

01/20/2006

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