

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000065720

Entity Name: MOUNTAIN VIEW HOLDINGS, LLC

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 20-3098764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA, INC
2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DE WAULF AND HANSSEN, CAPITAL MANAG E MENT
Address: 48 PAR LA VILLE ROAD SUITE 107
City-St-Zip: HAMILTON BERMUDA, BM HM 11 BM

Title: MGRM (X) Delete
Name: CENTURION MANAGEMENT, SERVICES LIM I T ED
Address: NERINE CHAMBERS, 5 COLOMBUS CENTRE
City-St-Zip: BRITISH VIRGIN ISLAND, BV BVI BV

Title: MGRM () Delete
Name: COOK, ROGER
Address: 2121 PONCE DE LEON BLVD SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: THE ARGYLL TRUST COM, PANY
Address: PO BOX 556 MAIN STREET
City-St-Zip: CHARLESTON, NEVIS, XX XX XX

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 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: ROGER COOOK

MGRM

04/23/2007

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