

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000070616

1. Entity Name

MANGO HOLDINGS SOUTH SHORE, LLC



Principal Place of Business

1015 NW 31ST AVE
POMPANO BEACH, FL 33069

Mailing Address

1015 NW 31ST AVE
POMPANO BEACH, FL 33069

DO NOT WRITE IN THIS SPACE

02202007No Chg-LLC

CR2E083 (11/05)

4. FEI Number

41-2181128

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fees Required

6. Name and Address of Current Registered Agent

JENKINS, ROGER D
1015 NW 31ST AVE
POMPANO BEACH, FL 33069

**DO NOT WRITE
IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
JENKINS, ROGER D
3108 S. BARKLEY LANE
VALRICO, FL 33594

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
GOMEZ, GERARDO E
5404 N.W. 108TH WAY
CORAL SPRINGS, FL 33076

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

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03/07/07-80055-014 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

Christina Gomez

Christina Gomez 2-20-07

954774484

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #