

21.

02-03-2006 90079 016 ****50.00

DOCUMENT # L05000085397 1. Entity Name M.C.J. HOLDINGS, LLC		02-03-2006 90079 016 ****50.00	
Principal Place of Business 633 S.E. 3RD AVENUE, SUITE 4-R FT. LAUDERDALE, FL 33301		Mailing Address 633 S.E. 3RD AVENUE, SUITE 4-R FT. LAUDERDALE, FL 33301	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-3495012		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MAFFEI, GEORGE P ESQ. 633 S.E. 3RD AVENUE, SUITE 4-R FT. LAUDERDALE, FL 33301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)</small> DATE _____			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZP	MGRM MAFFEI, CARMEN 633 S.E. 3RD AVENUE, SUITE 4-R FT. LAUDERDALE, FL 33301 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u>Carmen Maffei</u> MGRM CARMEN MAFFEI <u>1/30/06 954-527-0662</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF ADDRESSING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small> <small>Office Daytime Phone #</small>			



ATTACHMENT
30061002

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 7, 2006

M.C.J. HOLDINGS, LLC
633 S.E. 3RD AVENUE, SUITE 4-R
FT. LAUDERDALE, FL 33301

Subject: M.C.J. HOLDINGS, LLC

Reference Number: L05000085397

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/CJ

ANNUAL REPORTS SECTION