

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000116520

FILED
Mar 05, 2008
Secretary of State

Entity Name: GROUP MHM INVESTMENT, LLC

Current Principal Place of Business:

2121 PONCE DE LEON BLVD., STE. 1050
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD., STE. 1050
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-3887608

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., STE. 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: VANRAN S.A.,
Address: 2121 PONCE DE LEON BLVD. SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: M.E.R. CORPORATION O, F SOUTH FL, IN C .
Address: 2121 PONCE DE LEON BLVD. SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: VALERY INVESTMENTS O, VERSEAS CORP.
Address: 2121 PONCE DE LEON BLVD. SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: M.E.R. CORPORATION O, F SOUTH FL, IN C .
Address: 5805 BLUE LAGOON DR. SUITE 200
City-St-Zip: MIAMI, FL 33126

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: HENRY VANDER LINDE

MGR

03/05/2008

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