2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Aug 02, 2006
Secretary of State

DOCUMENT# L05000120674

Entity Name: MEGA BUILDERS CENTER, LLC

Current Principal Place of Business:

3015 CHIQUITA BOULEVARD
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

12200 NORTHWEST 5 STREET
PLANTATION, FL 33325 US

New Mailing Address:

FEI Number: 20-3964305 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORALI, SHAI
12200 NW 5TH STREETE
PLANTATION, FL 33325 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:	MORALI, SHAI	
Address:	12200 NW 5TH STREET	
City-St-Zip:	PLANTATION, FL 33325 US	
Title:	MGR	(X) Delete
Name:	RAZ, AMIT	
Address:	13110 SOUTHWEST 43 STREET	
City-St-Zip:	DAVIE, FL 33330 US	
Title:	MGR	(X) Delete
Name:	HAROSH, YOSET	
Address:	1134 SOUTHWEST 149 TERRACE	
City-St-Zip:	SUNRISE, FL 33326	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: SHAI MORALI MGMR 08/02/2006

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