

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000121842

FILED  
May 01, 2006  
Secretary of State

Entity Name: MGA LIMITED LIABILITY COMPANY

## Current Principal Place of Business:

8245 SW 145 STREET  
MIAMI, FL 33158 US

## New Principal Place of Business:

## Current Mailing Address:

8245 SW 145 STREET  
MIAMI, FL 33158 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

COSIO, EDUARDO  
901 PONCE DE LEON BLVD  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

COSIO, EDUARDO  
901 PONCE DE LEON BLVD  
304  
CORAL GABLES, FL 33134 US

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:

05/01/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: COSIO, ROBERTO R  
Address: 8245 SW 145 STREET  
City-St-Zip: MAIMI, FL 33158 US

Title: MGMR ( ) Delete  
Name: COSIO, ALINA  
Address: 8245 SW 145 STREET  
City-St-Zip: MIAMI, FL 33158 US

Title: MGRM ( ) Delete  
Name: COSIO, J RAUL  
Address: 12310 SW 93 COURT  
City-St-Zip: MIAMI, FL 33176 US

Title: MGRM ( ) Delete  
Name: COSIO, MARIA F  
Address: 12310 SW 93 COURT  
City-St-Zip: MIAMI, FL 33176 US

Title: MGRM ( ) Delete  
Name: COSIO, EDUARDO  
Address: 8050 SW 53RD COURT  
City-St-Zip: MIAMI, FL 33143 US

Title: MGRM ( ) Delete  
Name: COSIO, GRACE  
Address: 8050 SW 53RD COURT  
City-St-Zip: MIAMI, FL 33143 US

## 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:

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: EDUARDO COSIO

MR.

05/01/2006

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