2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 09, 2007 8:00 am
Secretary of State
03-22-2007 90176 034 ****55.00

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1. Entity Name
MV FLORIDA REAL ESTATE, LLC

Principal Place of Business	Mailing Address
1122 CLIFTON AVENUE CLIFTON, NJ 07013	200 S. ORANGE AVENUE, SUITE 2300 ORLANDO, FL 32801

03152007 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
16 Microlab Road	16 Microlab Road
Suite, Apt. #, etc.: Suite A	Suite, Apt. #, etc.: Suite A
City & State: Livingston, NJ	City & State: Livingston, NJ
Zip: 07039 Country: USA	Zip: 07039 Country: USA

4. FEI Number: 20-4057208 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
A.G.C. CO. 200 S. ORANGE AVENUE, SUITE 2300 ORLANDO, FL 32801	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

Make check payable to:
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing Member Andrew Abramson 1122 Clifton Avenue Clifton, NJ 07013	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing Member Larry Pantirer 16 Microlab Road, Suite A Livingston, NJ 07039	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing Member Howard Schwartz 16 Microlab Road, Suite A Livingston, NJ 07039	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing Member Alan Pires 16 Microlab Road, Suite A Livingston, NJ 07039	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Howard Schwartz 3/16/07 973-992-2443
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #