

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000001672

Entity Name: MET ENTERPRISES LLC

FILED  
Jan 21, 2007  
Secretary of State

## Current Principal Place of Business:

7800 SW 57 AVE.  
207-C  
MIAMI, FL 33143 US

## New Principal Place of Business:

## Current Mailing Address:

7800 SW 57 AVE.  
207-C  
MIAMI, FL 33143 US

## New Mailing Address:

7800 SW 57 AVE.  
207-D  
MIAMI, FL 33143 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOUSA, PATRICIA D  
7800 SW 57 AVE.  
207-C  
MIAMI, FL 33143 US

## Name and Address of New Registered Agent:

SOUSA, PATRICIA D  
7800 SW 57 AVE.  
207-D  
MIAMI, FL 33143 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:

01/21/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MAZZOTTA, MELISSA C  
Address: 7800 SW 57 AVE. SUITE 207-C  
City-St-Zip: MIAMI, FL 33143 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MAZZOTTA, MELISSA C  
Address: 7800 SW 57 AVE. SUITE 207-D  
City-St-Zip: MIAMI, FL 33143 US

Title: MGR ( ) Change (X) Addition  
Name: SOUSA, PATRICIA  
Address: 7800 SW 57TH AVE STE 207-D  
City-St-Zip: MIAMI, FL 33143

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: MELISSA MAZZOTTA

MGR

01/21/2007

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