

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000005192

Entity Name: MGH 105 T2, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

80 SW 8 ST.
2038
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

5805 BLUE LAGOON DR
SUITE 200
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 90-0323917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AG CORPORATE SERVICES, LLC
5805 BLUE LAGOON DR
SUITE 200
MIAMI, FL 33126 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: MGR () Delete
Name: LOPEZ, FRANCISCO
Address: AV. LA ESTANCIA CCCT TORRE B PISO 11
City-St-Zip: OFIC. 1107 CHUAO,CARACAS, . VENEZUELA

Title: MGR () Delete
Name: VELASQUEZ, JUAN CARLOS
Address: AV. LA ESTANCIA CCCT TORRE B PISO 11
City-St-Zip: OFIC. 1107 CHUAO,CARACAS, . VENEZUELA

Title: MGR () Delete
Name: ARECHABALETA, JOKIN
Address: AV. LA ESTANCIA CCCT TORRE B PISO 11
City-St-Zip: OFIC. 1107 CHUAO,CARACAS, . VENEZUELA

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 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: FRANCISCO LOPEZ

MGR

04/29/2009

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