2007 在I隔計ED LIABILITY COMPANY ANNUAL REPORT

| 20011 | | | | | | | | |
|---|---|---|--|--|----------------------------------|--|--|--|
| 1. Entity Nam | | | | F | IL.ED | | | |
| MC MULT | MC MULTIPLES DECORATIONS LLC | | | · 07 MAR 30 AM 10: 26 | | | | |
| Principal Plac | | Mailing Address | | | SECRET | 100 AM (U: 26 | | |
| 1829 NW 41 SUITE #1 | | 1829 NW 4 TH STREET Suite #1 | 1 | 71 | IALLAH) | TARY OF STATE ISSEE, FLORID, | 4 | |
| MIAMI, FL 3: | Place of Business - No P.O. Box # | 3. Mailing Address | • | | | | | |
| 19201 Suite, Apt. | Collins Ave | Suite, Apt. #, etc. | ell A | ve IIIIII | | EBIII BRIII BBIAR IBIAB IBIBB WAR | | |
| City & State | te: 131 A | # 51443 City & State | | 03292007 4. FEI Num | | CR2E083 (12/06 | Applied For | |
| SUNN | - - 1 1 - 1 | | F L Country | 4. FEI NOIT | ็ราางา | 1)7 | Not Applicable | |
| 3316 | 6. Name and Address of Current F | 33131 | ÜŠA | | te of Status Desired | Fee Requi | | |
| Name Carrian Misael | | | | | | | | |
| MISAEL, CARRIZO 1 1820 NW 1TH STREET | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| MIAMI EL 33125 | | | | 455 NE 25 ST # 401 | | | | |
| | | | CitX | iami | | FL 学会 | 37 | |
| 8. The above named entity submits this statement to be 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 . | Signature, typed or printed name of registered agent at | nd title if applicable. (NOTE: F | registered Agent signat | ture required when reinstating) | | 3 29 10 DATE | | |
| Filing Fee is \$50.00 Due by May 1, 2007 | | | | Make check payable to Florida Department of State | | | | |
| 9. | MANAGING MEMBER | IRS/MANAGERS | 10. | | ADDITION | S/CHANGES | | |
| TITLE NAME | MGR | ☐ Delete | TITLE NAME | Misael | | Change | | |
| STREET ADDRESS | 1829 NW 4TH STREET SUITE #1 | | STREET ADDRESS | 455 NE Miami | | ~#401 n 3137 | NGRM | |
| TITLE | MGRM | Delete | TITLE | - | | ☐ Change | Addition | |
| NAME STREET ADDRESS | LEONARDO, PASTRANA S 1829 NW 4TH STREET SUITE #1 | | NAME | | 100959 | T | | |
| CITY-ST-ZIP | | | STREET ADDRESS | - 1,500,000 | /07- 01041· | | | |
| | MIAMI, FL 33125 | | CITY-ST-ZIP | 04/10B. | /07- 01041 | 086 **50. 0 0 | N Addition | |
| TITLE NAME | MIAMI, FL 33125 | ☐ Delete | CITY-ST-ZIP TITLE NAME | 04/06. | /07- 01041 | | Addition | |
| TITLE | MIAMI, FL 33125 | ☐ Delete | CITY-ST-ZIP TITLE | 610bal 34,06 | /07- 01041 | 006 **50.00 Ictworbinger ve | Addition Enc. | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | certify that the information supplied with on this report is true and accurate and bility company or the receiver or trustee | Delete Delete Delete | CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TO STREET ADDRESS CITY-ST-ZIP T | Global 444 Brid \$51443 Miami | Trust A CKell A FL 331 | UC+WOY BECharge VC I Change Change | Addition Addition Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | certify that the information supplied with on this report is true and accurate and bility company or the receiver or truste | Delete Delete Delete Delete this filling does not qualify for that my signature shall have the appowered to execute this re | CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | Global 444 Brid 51443 Miami | Trust A CKell A FL 331 | UC+WOY BECharge VC I Change Change | Addition Addition Addition Addition | |