2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000013993

Name:

Address:

City-St-Zip:

MILA, MICHAEL

COCO, FL 32922

1121 PEACHTREE ST

Entity Name: M AND Z PROPERTIES LLC

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1121 PEACHTREE ST COCOA, FL 32922 **Current Mailing Address: New Mailing Address:** 1121 PEACHTREE ST COCO, FL 32922 FEI Number: 22-3921467 FEI Number Applied For () FEI Number Not Applicable () 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: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. LIBERTY TAX SERVICE 1840 SW 22ND ST. 702 N COURTENAY PARKWAY 4TH FLOOR MERRITT ISLAND, FL 32953 MIAMI, FL 33145 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: TIMOTHY TEST 05/01/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete MILA, MICHAEL Name: Name: Address: 1121 PEACHTREE ST Address: City-St-Zip: COCO, FL 32922 City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: ZOMBO, PAUL Name: Address: 1121 PEACHTRE ST. Address: City-St-Zip: COCO, FL 32922 City-St-Zip: Title: () Delete Title: () Change () Addition ZOMBO, PAUL Name: Name: 1121 PEACHTREE ST Address: Address: City-St-Zip: COCO, FL 32922 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PAUL ZOMBO S 05/01/2009