

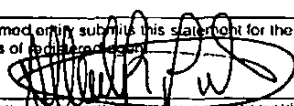
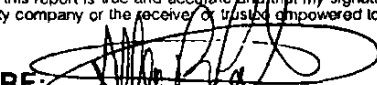
2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 07, 2007 8:00 am
Secretary of State

02-12-2007 90305 002 ****50.00

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1st MOORE CR2E083 (10/06)

DOCUMENT # L06000027058					
1. Entity Name SWINGMIAMI ENTERTAINMENT LLC					
Principal Place of Business 780 NE 69 ST 2005 MIAMI FL 33138 US			Mailing Address 780 NE 69 ST 2005 MIAMI FL 33138 US		
2. Principal Place of Business - No P.O. Box # 275 NE 18 st			3. Mailing Address 275 NE 18 st		
Suite, Apt. #, etc. 107			Suite, Apt. #, etc. 107		
City & State Miami, FL			City & State Miami, FL		
Zip 33132		Country USA	Zip 33132		Country USA
4. FEI Number 20-4495483			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent PATINO, ALFREDO R 780 NE 69 ST 2005 MIAMI FL 33138			7. Name and Address of New Registered Agent Name Patino, Alfredo R Street Address (P.O. Box Number is Not Acceptable) 275 NE 18 st #107 City Miami City FL Zip Code 33132		
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 		Alfredo Patino President		DATE 1/29/07	
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR PATINO, ALFREDO R 780 NE 69 ST #2005 MIAMI FL 33138	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM LMJ HOLDINGS, INC. 2332 GALIANO CORAL GABLES FL 33134	☒ 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
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
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 Section 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 		Alfredo R. Patino		DATE 1/29/07 786-356-8710	
SIGNATURE AND PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					