

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000027306

Entity Name: MASU, LLC

**FILED**  
**Jan 22, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

4515 SOUTH OCEAN BOULEVARD  
HIGHLAND BEACH, FL 334874200

**New Principal Place of Business:**

**Current Mailing Address:**

4515 SOUTH OCEAN BOULEVARD  
HIGHLAND BEACH, FL 334874200

**New Mailing Address:**

FEI Number: 65-0988170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAY, SUSAN C  
4515 SOUTH OCEAN BOULEVARD  
HIGHLAND BEACH, FL 334874200 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MS. ( ) Change (X) Addition  
Name: RAY, SUSAN C MS.  
Address: 4515 SOUTH OCEAN BLVD  
City-St-Zip: HIGHLAND BEACH, FL 33487

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: SUSAN C. RAY

MS.

01/22/2007

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