2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000054717

1. Entity Name

MBP INVESTMENT GROUP, LLC



FILED May 09, 2008 08:00 AN Secretary of State

Principal Place of Business

275 NE 28TH STREET BOCA RATON, FL 33431 Mailing Address

275 NE 28TH STREET BOCA RATON, FL 33431



04222008 No Chg-LLC

CR2E083 (12/07)

| 4. FEI Number | Applied F | or |
|----------------------------------|-------------------|-------|
| 20-4960795 | Not Appli | cable |
| E. Cartificate of Status Desired | \$5.00 Additional | |

i J. Commonic or C

Fee Required

| Ü | . Name | and. | Address | ٥f | Current | Registe | red . | Agent |
|---|--------|------|---------|----|---------|---------|-------|-------|
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DERALUS, PROFETE 275 NE 28TH STREET BOCA RATON, FL 33431

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| | | IN IHIS SPACE |
|-------------------|---|---|
| | named entity submits this statement for the purpose of cha tions of registered agent | nging its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept |
| SIGNATURE. | Signature, typed or printed name of registered agent and title it applicable | (NOTE: Registered Agent signature required when reinstating) |
| FILE After May | E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75 | 08/04/08-80004-022 138.75 |
| 9. | MANAGING MEMBERS/MANAGERS | "我们是一个大学的,我们就是一个大学的,我们就是一个大学的,我们就是一个大学的,我们就是一个大学的,我们就是一个大学的,我们就是一个大学的,我们就是一个大学的, |
| TITLE | MGRM | |
| NAME | DERALUS, PROFETE | |
| STREET ADDRESS | 275 NE 28TH STREET | |
| CITY-ST-ZIP | BOCA RATON, FL 33431 | |
| TITLE | MGR | |
| NAME | DERALUS MARIE | |

| | NAME STREET ADDRESS CITY-ST-ZIP | DERALUS, PROFETE 275 NE 28TH STREET BOCA RATON, FL 33431 |
|---|---------------------------------------|---|
| | TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR DERALUS, MARIE 275 NE 28TH STREET BOCA RATON, FL 33431 |
| | NAME STREET ADDRESS CITY-ST-ZIP | |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: Deral WS 4-22-08(561) 368-53-10

SIGNATURE: Deral WS 4-22-08(561) 368-53-10

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Date