

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056969

FILED  
May 24, 2007  
Secretary of State

Entity Name: MCQINTRY ENTERPRISES, LLC

**Current Principal Place of Business:**

16057 TAMPA PALMS BLVD. WEST  
192  
TAMPA, FL 33647

**New Principal Place of Business:**

54 NW 103RD STREET  
MIAMI SHORES, FL 33150

**Current Mailing Address:**

16057 TAMPA PALMS BLVD WEST  
192  
TAMPA, FL 33647

**New Mailing Address:**

54 NW 103RD STREET  
MIAMI SHORES, FL 33150

FEI Number:                      FEI Number Applied For (X)                      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:**

JOHNSON, LOLITA  
16057 TAMPA PALMS BLVD WEST  
192  
TAMPA, FL 33647 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: CEO ( ) Delete  
Name: VINCENT, DIMITRY K  
Address: 16057 TAMPA PALMS BLVD WEST #192  
City-St-Zip: TAMPA, FL 33647

Title: P ( ) Delete  
Name: JOHNSON, LOLITA D  
Address: 16057 TAMPA PALMS BLVD WEST #192  
City-St-Zip: TAMPA, FL 33647

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: CEO (X) Change ( ) Addition  
Name: VINCENT, DIMITRY K  
Address: 54 NW 103RD STREET  
City-St-Zip: MIAMI SHORES, FL 33150

Title: P (X) Change ( ) Addition  
Name: MCQUEEN, LOLITA D  
Address: 54 NW 103RD STREET  
City-St-Zip: MIAMI SHORES, FL 33150

Title: VP ( ) Change (X) Addition  
Name: VINCENT, SERGE J  
Address: 54 NW 103RD STREET  
City-St-Zip: MIAMI SHORES, FL 33150

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.

SIGNATURE: LOLITA JOHNSON

P

05/24/2007

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