## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000057926

MERRELL CONSULTING GROUP, LLC



**FILED** Mar 17, 2008 08:00 Al Secretary of State

Principal Place of Business

4771 NE 29TH AVE. FORT LAUDERDALE, FL 33308 Mailing Address 4771 NE 29TH AVE.

FORT LAUDERDALE, FL 33308



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03102008 No Chg-LLC CR2E083 (12/07) Applied For 4. FEI Number 20-5107234 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

MERRELL, MICHELE M 4771 NE 29TH AVE. FORT LAUDERDALE, FL 33308

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or doin, in the state of Fiorida. Fair familiar with, and accept the obligations of registered agent.  Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
FILE After May	NOW!!! FEE IS \$138.75 1, 2008 Fee will be \$538.75	U00000851313 04/03/08-90004-007 138.75					
9.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS PRES MERRELL, MICHELE M 4771 NE 29TH AVE. FORT LAUDERDALE, FL 33308						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							

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 pusper empowered to execute this report as required by Chapter 608, Florida Statutes.

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

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