

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000086754

FILED
Aug 19, 2008
Secretary of State

Entity Name: MBA FORTUNE, LLC.

Current Principal Place of Business:

4302 HOLLYWOOD BLVD
323
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

4302 HOLLYWOOD BLVD
323
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

Name and Address of New Registered Agent:

BRADY, CHARLES W
4302 HOLLYWOOD BLVD
323
HOLLYWOOD, FL 33021 US

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: MGRM () Delete
Name: BRADY, CHARLES W
Address: 4302 HOLLYWOOD BLVD, #323
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM () Delete
Name: BRADY, STEPHANIE C
Address: 4302 HOLLYWOOD BLVD, #323
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM () Delete
Name: MOOYOUNG, PAUL W
Address: 4302 HOLLYWOOD BLVD, #323
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM () Delete
Name: ALLEN, LAURENCE W
Address: 4302 HOLLYWOOD BLVD, #323
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM (X) Delete
Name: ALLEN, NICOLA C
Address: 4302 HOLLYWOOD BLVD, #323
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM (X) Delete
Name: MOOYOUNG, NICOLE E
Address: 4302 HOLLYWOOD BLVD, #323
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: MOOYOUNG, NICOLE E
Address: 4302 HOLLYWOOD BLVD, #323
City-St-Zip: HOLLYWOOD, FL 33021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES W. BRADY

MGRM

08/19/2008

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