2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 19, 2007 8:00 am Secretary of State 04-02-2007 90440 013 ****50.00

DOCUI 1. Entity Nam M & E, LL	e	# L06000121			04-02-200	7 90440 0	13	30.00		
Principal Place of Business Mailing Address						7	• • •			
3512 7TH AV Birmingham		2	3512 7TH AVE SOUTH BIRMINGHAM, AL 35222			30905181				
2. Principal Place of Business - No P.O. Box #			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02072007	Chg-LLC	CR2E083		
City & State			City & State			4. FEI Num	8132187			plied For it Applicable
Zip		Country	Z _I p	Coun	try		e of Status Desired		.00 Add	
	6. Name	and Address of Current i	Registered Agent	Name	7. Name and Address of New Registered Agent					
BLUE, ROI	B				Name					
221 MCKE	NZIE AVE	E HUTCHINSON & WA	ALTERS	Street Address	dress (P.O. Box Number is Not Acceptable)					
PANAMA (CITY, FL	32401	 -,		City	·		FL	Zip Code	•
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 access the obligations of registered agent.										and accept
SIGNATURE										
Fi O	ling Fee ue by Ma	is \$50.00 y 1, 2007	-			Make check pay Florida Departmen				
9.		MANAGING MEMBE	I RS/MANAGERS	10.		 -	ADDITIONS/	CHANGES		
шп	MGRM		Delete	TITLE					Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	3512 7TH	RY, JOHN S I AVE SOUTH HAM, AL 35222			EET ADORESS - ST - ZIP					
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CITY-ST-ZIP			<u> </u>	+	-ST-ZP					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delette		I				Change	☐ Addition
11. I hereby certify that the information supplied with this filling does not quality 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: JO TYPED OR PRINTED HAME OF SIGNING MANAGER, OR AUTHORIZED REPRESENTATIVE DELE DELE DELE DELE										