

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000026803

Entity Name: MB GLOBAL SERVICES, LLC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

5795 N.W. 109TH AVENUE, #10
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

5795 N.W. 109TH AVENUE, #10
DORAL, FL 33178

New Mailing Address:

FEI Number: 20-8669439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDEROS, RALPH
4114 N.W. 4TH TERRACE
MIAMI, FL 33126 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: MGRM () Delete
Name: MARQUEZ, RAFAEL
Address: 5795 N.W. 109TH AVENUE, #10
City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete
Name: BOSQUE, CARLOS
Address: 13031 S.W. 88TH LANE
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: MARTINEZ, LORENZO
Address: 5073 NW 114 CT
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MARTINEZ, LORENZO
Address: 5795 N.W. 109TH AVENUE, #10
City-St-Zip: DORAL, FL 33178

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

Title: MGRM (X) Change () Addition
Name: MARQUEZ, RAFAEL
Address: 5795 N.W. 109TH AVENUE, #10
City-St-Zip: MIAMI, FL 33178

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: CARLOS BOSQUE

MGRM

04/27/2009

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