

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000063800

Entity Name: MMQ 2707, L.L.C.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

1800 S. OCEAN DRIVE
UNIT #2707
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

1800 S. OCEAN DRIVE
UNIT #2707
HALLANDALE BEACH, FL 33009

New Mailing Address:

1800 S. OCEAN DRIVE
UNIT #2408
HALLANDALE BEACH, FL 33009

FEI Number: 75-3256426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERBER, DANIEL J ESQ
TURNBERRY PLAZA, STE 801
2875 N.E. 191ST STREET
AVENTURA, FL 33180 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: MGR () Delete
Name: GONZALES MORALES, FABIOLA
Address: 1800 S. OCEAN DRIVE, UNIT #2707
City-St-Zip: HALLANDALE BEACH, FL 33009

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GONZALEZ, FABIOLA
Address: 1800 S. OCEAN DRIVE, UNIT #2707
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGR () Change (X) Addition
Name: YUSEF, YADIRA E
Address: 1800 S OCEAN DR. UNIT 2408
City-St-Zip: HALLANDALE BEACH, FL 33009

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: FABIOLA GONZALEZ

MGR

04/28/2009

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