

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000074332

Entity Name: MCBS LLC

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

950 NE 214TH LANE  
NORTH MIAMI, FL 33179 US

**New Principal Place of Business:**

11886 OSPREY POINT CIRCLE  
WELLINGTON, FL 33449 US

**Current Mailing Address:**

950 NE 214TH LANE  
NORTH MIAMI, FL 33179 US

**New Mailing Address:**

11886 OSPREY POINT CIRCLE  
WELLINGTON, FL 33449 US

FEI Number: 80-0454424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIAZ, CHRISTOPHER M  
11886 OSPREY POINT CIRCLE  
WELLINGTON, FL 33449 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  
Name: DIAZ, CHRISTOPHER M  
Address: 11886 OSPREY POINT CIRCLE  
City-St-Zip: WELLINGTON, FL 33449 US

Title: MGRM  
Name: ESPINAL, ANA J  
Address: 950 NE 214TH LANE  
City-St-Zip: NORTH MIAMI, FL 33179 US

Title: MGRM  
Name: DIAZ, BELKYS  
Address: 11886 OSPREY POINT CIRCLE  
City-St-Zip: WELLINGTON, FL 33449 US

I hereby 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: CHRISTOPHER M DIAZ

MGR

04/30/2011

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