

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000120219

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** NU BEGINNING INVESTMENT GROUP LLC

**Current Principal Place of Business:**

4325 S.W. 179TH WAY  
MIRAMAR, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

4325 S.W. 179TH WAY  
MIRAMAR, FL 33029

**New Mailing Address:**

**FEI Number:** 45-3644565

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCDUFFIE, LAJUAN E  
4325 SW 179TH WAY  
MIRAMAR, FL 33029 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  
Name: MCDUFFIE, LAJUAN E  
Address: 4325 SW 179TH WAY  
City-St-Zip: MIRAMAR, FL 33029 US

Title: MGRM  
Name: MCNAIR, FELICA  
Address: 6968 SW 39 ST # F-208  
City-St-Zip: DAVIE, FL 33314 US

Title: MGRM  
Name: PARKER, TALF JR.  
Address: 900 NW 126 ST  
City-St-Zip: NORTH MIAMI, FL 33168 US

Title: MGRM  
Name: BURKE, KIMBERLY  
Address: 17984 SW 29 COURT  
City-St-Zip: MIRAMAR, FL 33029 US

Title: MGRM  
Name: CLARKE, GINGER  
Address: 19229 NW 82 CIRCLE 33015  
City-St-Zip: MIAMI, FL 33015

Title: MGRM  
Name: MITCHELL, ROBERT  
Address: 1193 N. BAYSHORE DR. APT 1407  
City-St-Zip: NORTH MIAMI, FL 33181 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: LAJUAN MCDUFFIE

MGRM

04/25/2012

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