

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L93000000365

Entity Name: MB MANAGEMENT, L.C.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

4833 COLLINS AVENUE
C/O OBR SUITE 1714
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

4833 COLLINS AVENUE
C/O OBR SUITE 1714
MIAMI BEACH, FL 33140 US

New Mailing Address:

PO BOX 140668
CORAL GABLES, FL 33114 US

FEI Number: 65-0443295 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

M.J.F. REGISTERED AGENT CORP.
153 SEVILLA AVENUE
CORAL GABLES, FL 33134 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: MGRP () Delete
Name: MURRAY, JACQUES G
Address: 22 RUE DE L' ATHENEE
City-St-Zip: 1206 GENEVA, CH

Title: S () Delete
Name: PILLOIS, JEAN C
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: VP () Delete
Name: SEBAG, EMMANUEL
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: T () Delete
Name: POLLARD, RICHARD J
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: VP () Delete
Name: SIMMONDS, JOEL L
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

ADDITIONS/CHANGES:

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

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

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

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

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

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: JACQUES G MURRAY

MGRP

05/01/2007

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