

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002400

Entity Name: M.G. HOMES, L.C.

FILED
Apr 19, 2009
Secretary of State

Current Principal Place of Business:

21400 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180

New Principal Place of Business:

Current Mailing Address:

21400 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180

New Mailing Address:

FEI Number: 65-0875743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORIN, MOISES
21400 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, 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: MGRM () Delete
Name: GORIN, MOISES
Address: 21400 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: MGR () Delete
Name: GORIN, ANA
Address: 21400 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: MGR () Delete
Name: GORIN, ISAAC
Address: 21400 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI BEACH, FL 33180

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: GORIN, ISAAC
Address: 21400 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI BEACH, FL 33180

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: MOISES GORIN

MGRM

04/19/2009

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