2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 25, 2005
Secretary of State

DOCUMENT# L99000000528

Entity Name: M R Z 99, L.C.

Current Principal Place of Business:

1319 FLORIDA MALL AVE.
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

1319 FLORIDA MALL AVE.
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 59-3558660 **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:

CUEVAS, ANDREW ESQ
9200 DADELAND BLVD., SUITE 603
MIAMI, FL 33156 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: P ( ) Delete
Name: MORENA, JOSE R
Address: 5141 BRIGHTMOUR CR.
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete
Name: ZAVARELLA, NELSON
Address: 5177 BRIGHTMOUR CR.
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete
Name: RODRIQUEZ, JUAN J
Address: 4932 BRIGHTMOUR CR.
City-St-Zip: ORLANDO, FL 32837

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JUAN RODRIGUEZ MGR 08/25/2005

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