2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000001825

1. Entity Name

MMM 7800 VENTURE, LLC

Principal Place of Business

6820 LYONS TECHNOLOGY CIRCLE

SUITE 100

COCONUT CREEK, FL 33073 US

Mailing Address

6820 LYONS TECHNOLOGY CIRCLE

SUITE 100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

COCONUT CREEK, FL 33073 US



FILED May 01, 2007 08:00 A Secretary of State



04102007 No Chg-LLC

CR2E083 (11/05)

5. Certificate of Status Desired	\$5.00 Additional		
65-0907268			Not Applicable
4. FEI Number			Applied For

6. Name and Address of Current Registered Agent

BUTTERS, MALCOLM 6820 LYONS TECHNOLOGY CIRCLE SUITE 100 COCONUT CREEK, FL 33073

the obligations of registered agent.

SIGNATURE:

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SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent eignature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS		A A A A A A A A A A A A A A A A A A A	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BUTTERS, MALCOLM 6820 LYONS TECHNOLOGY CIRCLE, #100 COCONUT CREEK, FL 33073			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BUTTER, MARK 6820 LYONS TECHNOLOGY CIRCLE, #100 COCOUNT CREEK, FL 33073		U00000751750 05/18/07-80114-018 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature e bility company or the receiver or trustee empowered to exe	qualify for the exemptions contained in Chapter 119 half have the same legal effect as if made under out cute this report as required by Chapter 608, Florida	, Florida Statutes. I further certify that the information in; that I am a managing member or manager of the Statutes.	

8. 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. I am familiar with, and accept