

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 07, 2004 8:00 am
Secretary of State

05-07-2004 90006 022 ****55.00

DOCUMENT # L99000006982

1. Entity Name
MR INTERNATIONAL ENTERPRISES GROUP, LLC



Principal Place of Business
**4012 YARDLEY AVENUE NORTH
ST. PETERSBURG, FL 33713-3351**

Mailing Address
**4012 YARDLEY AVENUE NORTH
ST. PETERSBURG, FL 33713-3351**

24067879



2. Principal Place of Business

3. Mailing Address

5408 St James Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04192004

Chg-LLC

CR2E083 (10/03)

City & State

City & State

New Port Richey FL

4. FEI Number

59-3604239

Applied For

Not Applicable

Zip

Country

Zip

Country

34652 USA

5. Certificate of Status Desired

☒

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUSIECKI, MAREK
4012 YARDLEY AVENUE, NORTH
ST. PETERSBURG, FL 33713**

Name

Kelly Drew

Street Address (P.O. Box Number is Not Acceptable)

5408 St James Drive

City

New Port Richey

FL

Zip Code

34652

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 the obligations of registered agent.

SIGNATURE

Kelly L Drew Kelly L Drew, Accountant 4-19-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
RUSIECKI, MAREK
4012 YARDLEY AVENUE NORTH
ST. PETERSBURG, FL 337133351** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

Marek Rusiecki

Marek Rusiecki

4-21-04

727-328-0263

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

Date

Daytime Phone #