

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000932

Entity Name: MIG HOLDINGS LLC

FILED
Jan 03, 2007
Secretary of State

Current Principal Place of Business:

8890 W OAKLAND PK BLVD
#202
SUNRISE, FL 33326

New Principal Place of Business:

Current Mailing Address:

8890 W OAKLAND PK BLVD
#202
SUNRISE, FL 33326

New Mailing Address:

FEI Number: 65-1092894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCUS, JEFFREY I
8990 W OAKLAND PARK BLVD.
#202
SUNRISE, FL 33326 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: HARPAZ, AVIHAI
Address: 5551 LOCKETT RD.
City-St-Zip: FT MYERS, FL 33905

Title: MGRM () Delete
Name: WOODS, CYPRUS
Address: 5551 LOCKETT RD.
City-St-Zip: FT MYERS, FL 33905

Title: D () Delete
Name: MARCUS, JEFFREY I T
Address: 8890 W OAKLAND PK BLVD # 202
City-St-Zip: SUNRISE, FL 33351

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 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: JEFFREY I MARCUS

D

01/03/2007

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