### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M03000003827

1. Entity Name
MBC-INTERNATIONAL DRIVE, LLC



Principal Place of Business Mailing /

C/O MURRAY BROS. CADDYSHACK 455 S LEGACY TRAIL ST AUGUSTINE, FL 32092 Mailing Address

C/O MURRAY BROS. CADDYSHACK 455 S LEGACY TRAIL ST AUGUSTINE, FL 32092

#### FILED Apr 16, 2007 08:00 Al Secretary of State



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| 03152007 No Chg-LLC | 4 FEI Number

CR2E083 (11/05)

4. FEI Number 73-1685345

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HASKELL, MACDONALD T C/O MURRAY BROS. CADDYSHACK 455 S LEGACY TRAIL ST AUGUSTINE, FL 32092

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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

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, 2007

9.	MANAGING MEMBERS/MANAGERS
IITLE NAME STREET ADDRESS CITY+ST-7IP	MGR CS VENTURES, LLC 455 S LEGACY TRAIL ST AUGUSTINE, FL 32092
INTE NAME STREET ADDRESS CITY-SE-ZIP	
THEE HAME STREET ADDRESS CITY-SI-7IP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STPEET ADDRESS CITY-ST-ZIP	
THEL : NAME STREET ADDRESS CHY-ST-ZIP	

U00000710088 04/25/07-80029-015 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 timited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE: Kolesky Paris

Kobart W. Brown

4/4/67 8/8-222-2724