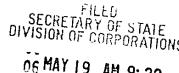
2006 LIMITED L'IABILITY COMPANY ANNUAL REPORT

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



Date

Daytime Phone ♥

DOCUMENT # M0500005358 1. Entity Name MEG HOLDINGS GROUP, LLC								06 MAY 19 AM 9: 39					
Principal Plac 66 FANSHAW YONKERS, N	AVENUE	s	Mailing Address 66 FANSHAW AVENUE YONKERS, NY 10705					85181 8 1811 68 171 1	1 2 111: 35 111 15 111	11 4514: 4 11 5 1		11 1 30 4 1 5 1	
Principal Place of Business Suite, Apt. #, etc.			Mailing Address Suite, Apt. #, etc.										
			City & State				04242006	Chg-LLC		CR2E083		-God Far	
City & State			,				4. FEI Number Applied For 84-1688329 Not Applied					t Applicable	
Zip		Country	Žip				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 Name							
NUKHO, GEORGE C/O MEG HOLDINGS GROUP, LLC					Street Address (P.O. Box Number is Not Acceptable)								
5929 TARPAN GARDEN CIRCLE, UNIT 102 CAPE CORAL, FL 33904													
					City	City FL Zip Code							
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													
Filing Fee is \$50.00 Due by May 1, 2006								F		heck paya partment		•	
9.	MANAGING MEMBERS / MANAGERS MGRM					ADDITIONS/CHANGES					1.00	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	NUKHO, 66 FANSI	GEORGE HAW AVENUE S, NY 10705	☐ Delete	E IE EET AODRESS '- ST- ZIP	M10	Michael Nullo 66 Fanshan Avenul 4 Mens N.J. 10705					M vooition □		
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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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.												rmation er of the	