2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000005152

Entity Name: MCCI HOLDINGS, LLC

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4960 SW 72ND AVENUE SUITE 406 ATTN: JEFF LAWRENCE MIAMI, FL 33155 **Current Mailing Address: New Mailing Address:** 4960 SW 72ND AVENUE SUITE 406 ATTN: JEFF LAWRENCE MIAMI, FL 33155 FEI Number: 20-5569675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DRIVE, SUITE 4 WESTON, FL 33331 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: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete JORDAN, KEVIN M Name: Name: 85 BROAD STREET Address: Address: City-St-Zip: NEW YORK, NY 10004 City-St-Zip: Title: MGR () Delete Title: () Change () Addition CHAVEZ, MARTIN E Name: Name: Address: 85 BROAD STREET Address: City-St-Zip: NEW YORK, NY 10004 City-St-Zip: Title: MGR () Delete Title: () Change () Addition WILLIAMS, PRECIOUS Name: Name: Address: 85 BROAD STREET Address: City-St-Zip: NEW YORK, NY 10004 City-St-Zip: () Delete Title: MGR Title: () Change () Addition Name: ARMAS, JOSE DR. Name: 4960 SW 72ND AVENUE SUITE 406 Address: Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip: Title: MGR () Delete Title: () Change () Addition CAMPO, OTTO Name: Name: 4960 SW 72ND AVENUE SUITE 406 Address: Address: City-St-Zip: MAIMI, FL 33155 City-St-Zip: Title: () Delete Title: () Change () Addition CRANTS, ROBERT Name: Name: Address: 1 BURTON HILLS BOULEVARD Address: NASHVILLE, TN 37215 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: OTTO CAMPO CFO 04/22/2008