

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000013704

**Entity Name:** M.G PROPERTIES OF TAMPA BAY, LLC

**Current Principal Place of Business:**

12837 TAR FLOWER DR.  
TAMPA, FL 33626

**Current Mailing Address:**

12837 TAR FLOWER DR.  
TAMPA, FL 33626

**FEI Number:** 45-4416816

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GAWIENCZUK, PIOTR  
12837 TAR FLOWER DR.  
TAMPA, FL 33626 US

*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

**Authorized Person(s) Detail :**

|                 |                     |                 |                   |
|-----------------|---------------------|-----------------|-------------------|
| Title           | MGRM                | Title           | MGRM              |
| Name            | GAWIENCZUK, PIOTR   | Name            | GAWIENCZUK, MAREK |
| Address         | 12837 TAR FLOWER DR | Address         | LOKIETKA 115      |
| City-State-Zip: | TAMPA FL 33626      | City-State-Zip: | ELBLAG PL 82-30-0 |

Title AUTHORIZED MEMBER  
Name GAWIENCZUK, JOANNA TYCZYNSKA  
Address 12837 TAR FLOWER DR.  
City-State-Zip: TAMPA FL 33626

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PIOTR GAWIENCZUK

**MANAGER**

**03/16/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date