

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

0026563

DOCUMENT # L01000020753

1. Entity Name

RED BEAN ENTERPRISES, L.L.C.



05-02-2003 90584 032 ****55.00

Principal Place of Business

**4587 NORTH UNIVERSITY DRIVE
LAUDERHILL FL 33351**

Mailing Address

**4587 NORTH UNIVERSITY DRIVE
LAUDERHILL FL 33351**

2. Principal Place of Business

11210 S.W. 49TH PL.

3. Mailing Address

11210 S.W. 49TH PL.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



CHECK HERE IF MAKING CHANGES

City & State

FT. LAUDERDALE, FL.

City & State

FT. LAUDERDALE, FL.

4. FEI Number

**APPLIED FOR
30-0135826**

Applied For

Not Applicable

Zip

33330

Country

USA

Zip

33330

Country

USA

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**CRISSEY, JEFFREY T
4587 NORTH UNIVERSITY DRIVE
LAUDERHILL FL 33351**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
11210 S.W. 49TH PL.
City
FT. LAUDERDALE, FL Zip Code
33330

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.

JEFFREY T. CRISSEY

(NOTE: Registered Agent signature required when reinstating)

4/29/03

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE #	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
1	MGR CRISSEY, JEFFREY T	4587 NORTH UNIVERSITY DRIVE	LAUDERHILL FL 33351	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	MGRM CRISSEY, JEFFREY T.	11210 S.W. 49TH PL.	FT. LAUDERDALE, FL. 33330	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	MGRM CRISSEY, CURTIS J.	PO BOX 85	STARKVILLE, MS. 39759	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

JEFFREY T. CRISSEY

4/29/03

(954) 252-6181

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

Date

Daytime Phone #

CR2E083 (10/02)