

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083323

FILED
Jun 13, 2005
Secretary of State

Entity Name: Y.B.G.F.Y.P. INVESTMENT GROUP, LLC

Current Principal Place of Business:

1265 NE 155 STREET
MIAMI, FL 33162

New Principal Place of Business:

Current Mailing Address:

1265 NE 155 STREET
MIAMI, FL 33162

New Mailing Address:

FEI Number: 20-1735809 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GERALDINE LAURAN LAZARRE
1265 NE 155 STREET
MIAMI, FL 33162 US

Name and Address of New Registered Agent:

LAZARRE, GERALDINE L
1265 NE 155 STREET
MIAMI, FL 33162 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: LAZARRE, GERALDINE

06/13/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LAZARRE-JONES, YVROSE
Address: 1265 NE 155 STREET
City-St-Zip: MIAMI, FL 33162

Title: MGR () Delete
Name: LOURAN LAZARRE, GERALDINE
Address: 1265 NE 155 STREET
City-St-Zip: MIAMI, FL 33162

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: LAZARRE, GERALDINE L
Address: 1265 NE 155 STREET
City-St-Zip: MIAMI, FL 33162

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GERALDINE LAZARRE

MGR

06/13/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date