2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000003721

KOHN, MARLENE R

MIAMI, FL 33156

12101 ROCK GARDEN LANE

Name:

Address:

City-St-Zip:

Entity Name: BENJAMIN R. SIEGAL FAMILY HOLDINGS, INC.

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
2775 SUNNY IS	SLES BLVD					
STE 118 NORTH MIAMI	BEACH, FL	33160	US			
Current Mailin	g Address:			New Maili	ng Address:	
2775 SUNNY IS	SLES BLVD					
STE 118 NORTH MIAMI	BEACH, FL	33160	US			
FEI Number: 65-0	722562	FEI Numbe	er Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
NELSON, BAR 2775 SUNNY IS STE 118 MIAMI, FL 3310	SLES BLVD					
The above namin the State of F		bmits this	statement for the p	urpose of changing i	ts registered	office or registered agent, or both
SIGNATURE:						
-	Electronic	Signature	e of Registered Age	nt		Date
Election Campaig	n Financing T	rust Fund	Contribution ().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Address: 101	(X) D GAL, BENJAM 55 COLLINS A HARBOUR, F	IIN R NE #1408		Title: Name: Address: City-St-Zip:	() Change () Addition
Address: 213	O () Do GAL, TED A 807 N.E. 38TH A ENTURA, FL 3	AVENUE		Title: Name: Address: City-St-Zip:	PTD (SIEGAL, TED 21307 N.E. 38 AVENTURA, F	BTH AVENUE
				Title:	() Ob () 0 dditi
Address: 101	(X) D GAL, JEAN D 55 COLLINS A HABOUR, FL	NE #1408		Name: Name: Address: City-St-Zip:	() Change ()Addition

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

KOHN, MARLENE R

CORAL GABLES, FL 33133

60 EDGEWATER DRIVE, LANAI WEST

SIGNATURE: TED SIEGAL D 01/05/2005