## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G62813

Entity Name: BEVERLY HILLS CAFE V, INC.

HORWITZ, JERROLD I

18500 NE 5TH AVENUE

N. MIAMI BEACH, FL 33179

Name:

Address:

City-St-Zip:

FILED Apr 29, 2008 Secretary of State

Littly Nai	me. BEVERE	THILLS CALL V, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
7041 W. COMMERCIAL BLVD TAMARAC, FL 33319 US			18500 NE 5TH AVENU 2ND FLOOR N MIAMI BEACH, FL 3		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
18500 NE 2ND FLOC N. MIAMI E		179 US	18500 NE 5TH AVENU 2ND FLOOR N MIAMI BEACH, FL 3		
FEI Number:	: 59-2326996	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
18500 NE 2ND FL	I, JERROLD I 5TH AVENUE IIAMI BEACH, I	FL 33179 US			
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( ) RICHMAN, MAF 18500 NE 5TH N. MIAMI BEAC	AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	FRIEDMAN, KE 18500 NE 5TH		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SHULER, JOHN 18500 NE 5TH		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title <sup>.</sup>	т (	Delete	Title:	( ) Change ( ) Addition	

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 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:

SIGNATURE: JERROLD I HORWITZ T 04/29/2008