

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000006439

FILED
Apr 30, 2005
Secretary of State

Entity Name: ARCHIE'S KEY BISCAYNE, L.L.C.

Current Principal Place of Business:

600 GRANDON BLVD., UNIT 19
UNIT 19
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

50 SW 10 STREET, SUITE 812
MIAMI, FL 33130

New Mailing Address:

FEI Number: 65-1013929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GABRIEL S. DIAZ-SARMIENTO, CPA
1985 NW 88TH CT STE 201
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

GABRIEL S. DIAZ-SARMIENTO, CPA
15588 SW 62 STREET
MIAMI, FL 33193 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: GABRIEL S. DIAZ-SARMIENTO, CPA

04/30/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: M & N INVESTMENTS US, A, LLC
Address: 50 SW 10 STREET, SUITE 812
City-St-Zip: MIAMI, FL 33130

Title: MGRM () Delete
Name: FOOD DEVELOPMENT COR, P.
Address: 50 SW 10 STREET, SUITE 812
City-St-Zip: MIAMI, FL 33135

Title: MGR () Delete
Name: ESCOBAR, JAIME
Address: 600 CRANDON BLVD 19 KEY BISC
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGR () Delete
Name: MALDONADO, IGNACIO
Address: 50 SW 10 STREET, SUITE 812
City-St-Zip: MIAMI, FL 33130

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

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

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

Title: MGR () Change (X) Addition
Name: ESCOBAR, NICOLAS
Address: 600 CRANDON BLVD 19 KEY BISC
City-St-Zip: KEY BUSCAYNE, FL 33149

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: ESCOBAR, NICOLAS

MGR

04/30/2005

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