

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 05, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000007575

1. Entity Name
HINSDALE BB LLC



Principal Place of Business

**% ORION INVESTMENT & MGMT LTD. CORP
9000 SW 152ND STREET, SUITE 106
MIAMI, FL 33157**

Mailing Address

**% ORION INVESTMENT & MGMT LTD. CORP
9000 SW 152ND STREET, SUITE 106
MIAMI, FL 33157**



06292005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1022960

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BROWN, B M ESQ.
% WHITE & BROWN, P.A.
9000 SW 152ND ST., STE. 102
MIAMI, FL 33157**

**DO NOT WRITE
IN THIS SPACE**

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.

(NOTE: Registered Agent signature required when reinstalling)

DATE

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BEBA COMPANY HOLDINGS LP
STREET ADDRESS	9000 SW 152 ST #106
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	MGR
NAME	SANZ, JOSEPH A
STREET ADDRESS	9000 SW 152 ST #106
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/05/05-80011-009 50.00

**DO NOT WRITE
IN THIS SPACE**

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:

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

6/30/05 305-278-8400

Date

Daytime Phone #