

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2004 8:00 am**  
**Secretary of State**

03-19-2004 90269 009 \*\*\*\*50.00

**DOCUMENT # L00000010735**

1. Entity Name  
**BS ENTERPRISES, LLC**



Principal Place of Business  
**1513 NE 26TH STREET  
FT LAUDERDALE, FL 33305**

Mailing Address  
**1513 NE 26TH STREET  
FT LAUDERDALE, FL 33305**



02062004 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-1052056**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BENEDICT, BRIAN  
1513 NE 26TH STREET  
FT LAUDERDALE, FL 33305**

**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. **BRIAN BENEDICT**

SIGNATURE:

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**BRIAN BENEDICT**

**3-15-2004**

**Filing Fee is \$50.00  
Due by May 1, 2004**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
BENEDICT, BRIAN  
1513 NE 26TH STREET  
FT LAUDERDALE, FL 33305**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
STEVE CHANEY  
1513 NE 26TH STREET  
FT. LAUDERDALE, FL 33305**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**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

**3-15-2004 954566 0501**

Date

Daytime Phone #