2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000030872

1. Entity Name B & A FOOD SALES, FLORIDA, LLC



FILED Mar 10, 2008 08:00 AN Secretary of State

Principal Place of Business

6110 BOULEVARD OF CHAMPIONS SUITE B NORTH LAUDERDALE, FL 33309 Mailing Address

2455 HWY 516 OLD BRIDGE, NJ 08857



DO NOT WRITE IN THIS SPACE

02182008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 65-1172792 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

EPSTEIN, BEN 6110 BOULEVARD OF CHAMPIONS SUITE B NORTH LAUDERDALE, FL 33309

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	ve named entity submits this statement for the purpose of cha lations of registered agent.	anging its registered office or registered agent, or b	ooth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	, DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			000000854111 03/26/08-80095-023 138.75
9.	MANAGING MEMBERS/MANAGERS		
TITE C	MGRM		

EPSTEIN, BENJAMIN STREET ADDRESS 6110 BOULEVARD OF CHAMPIONS SUITE B CITY-ST-ZIP NORTH LAUDERDALE, FL 33309 MGRM TITLE NAME EPSTEIN, ANDREW 6110 BOULEVARD OF CHAMPIONS SUITE B STREET ADDRESS CITY-ST-ZIP NORTH LAUDERDALE, FL 33309 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS CITY - ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

3/05/08

Daytime Phone #