

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033039

FILED
Apr 05, 2005
Secretary of State

Entity Name: ALLIED RECOVERY GROUP, LLC

Current Principal Place of Business:

1836 WEST 23 STREET
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

1836 WEST 23 STREET
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 26-0061876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERGER, DAVID J
1836 WEST 23 STREET
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: BZC LLC,
Address: 10041 SW 2 STREET
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: MEGA CAPITAL CORPORA, TION
Address: 1836 WEST 23 STREET
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR () Delete
Name: BECKY B CORPORATION,
Address: ONE MAIN STREET SUITE 201
City-St-Zip: EATONTOWN, NJ 07724

Title: MGR () Delete
Name: WORLDWIDE MERCHANDIS, E RESOURCES CO R PORATIO
Address: 55 EAST GRASSY SPRAIN ROAD, SUITE 200
City-St-Zip: YONKERS, NY 10710

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BZC LLC,
Address: 2600 ISLAND BOULEVARD, APT 2403
City-St-Zip: AVENTURA, FL 33160

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

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

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

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: DAVID BERGER

PRES

04/05/2005

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