

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022716

Entity Name: BENNINGTON FOODS, LLC

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

245 SE 1 STREET
SUITE 320
MIAMI, FL 33131

New Principal Place of Business:

245 SE 1 STREET
SUITE 401
MIAMI, FL 33131

Current Mailing Address:

245 SE 1STREET
SUITE 320
MIAMI, FL 33131

New Mailing Address:

245 SE 1STREET
SUITE 401
MIAMI, FL 33131

FEI Number: 20-0056762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: HAMEED, BANU NASEEM
Address: 245 SE 1STREET, SUITE 320
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: SHAH, ABUL H
Address: 245 SE 1STREET, SUITE 320
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HAMEED, BANU NASEEM
Address: 245 SE 1STREET, SUITE 401
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Change () Addition
Name: SHAH, ABUL H
Address: 245 SE 1STREET, SUITE 401
City-St-Zip: MIAMI, FL 33131

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: BANU NASEEM HAMEED

MGR

04/26/2005

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