


**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED

2006 JUN 28 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mk

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000022716					
1. Entity Name BENNINGTON FOODS, LLC					
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 245 SE 1st Street			3. Mailing Address 245 SE 1st Street		
Suite, Apt. #, etc. Suite 401			Suite, Apt. #, etc. Suite 401		
City & State Miami, Florida		City & State Miami, Florida		4. FEI Number 20-0056762	
Zip 33131		Country		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required					
DO NOT WRITE IN THIS SPACE				7. Name and Address of Current Registered Agent	
				Name Spiegel & Utrera, P.A.	
				Street Address (P.O. Box Number is Not Acceptable)	
				1840 Coral Way, 4th Floor	
City Miami				FL	Zip Code 33145
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
			FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1		
9. MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		MGR Hameed, Banu Naseem 245 SE 1 St., Miami, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		MGR Shah, Abul H. 245 SE 1 St., Miami, FL 33131		600077162306 07/07/06--01051--024 **50.00	
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10. 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: <i>Banu Naseem Hameed</i>		Banu Naseem Hameed, Mgr.		6/23/06 404-217-9193	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date		Daytime Phone #	

CR2E083B (12/02)