

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023975

Entity Name: FINE FOODS OF ENGLAND, LLC

FILED
Jan 31, 2006
Secretary of State

Current Principal Place of Business:

11111 BISCAYNE BOULEVARD
2112
MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

11111 BISCAYNE BOULEVARD
2112
MIAMI, FL 33181

New Mailing Address:

FEI Number: 61-7643956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEIN, MARK H ESQ.
7771 WEST OAKLAND PARK BLVD.
122
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

SCHNEIDER, PAUL F CPA
7860 PETERS ROAD
F-110
PLANTATION, FL 33324 US

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: PAUL F. SCHNEIDER

01/31/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MM () Delete
Name: EGHOLM, PAUL
Address: 11111 BISCAYNE BLVD., APT. 2112
City-St-Zip: MIAMI, FL 33181

Title: MM () Delete
Name: HAUXWELL, JOHN
Address: 11111 BISCAYNE BLVD., APT. 2112
City-St-Zip: MIAMI, FL 33181

Title: MM () Delete
Name: FORD, THOMAS L III
Address: 325 SE 2 AVE
City-St-Zip: DANIA BEACH, FL 33004

ADDITIONS/CHANGES:

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 Chapter 119, 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: PAUL EGHOLM

MM

01/31/2006

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