2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000025210

1. Entity Name

BEN AND DANIEL ENTERPRISES, L.L.C.



Apr 18, 2005 08:00 AM Secretary of State

Principal Place of Business

3825 WINDMILL LAKE ROAD

C/O JEFFREY B. WORTH FORT LAUDERDALE, FL 33332 Mailing Address

3825 WINDMILL LAKE ROAD C/O JEFFREY B. WORTH FORT LAUDERDALE, FL 33332



03232005 No Chg-LLC

CR2E083 (10/03)

FILED

4. FEI Number 20-0082859

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

KRAMER, ROBERT M 4000 HOLLYWOOD BLVD., SUITE 485-SOUTH HOLLYWOOD, FL 33021

DO NOT WRITE IN THIS SPACE

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	Signature, typed or stirted name of registored agent and file if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WORTH, JEFFREY B 3825 WINDMILL LAKE ROAD FORT LAUDERDALE, FL 33332		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U000000337 8 7 047)8705-80139-018 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			_ · · · · · _ · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

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 informatic 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 empower to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE