2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUI 1. Entity Name BESHEAF			FILE 07 MAY -3 A	M 9: 33
Principal Place 3702 W KENI TAMPA, FL 3	NEDY BLVD PO BOX 24269		Ali Alabert	ELORIDA
DO NOT WRITE IN THIS SPACE				22E083 (11/05)
			4. FEI Number 35-2213086 5. Certificate of Status Desired □	Applied For Not Applicable \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent				
MIKES, JAMES R 3702 W KENNEDY BLVD TAMPA, FL 33609		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, typoid or printed name of registered agent and title if applicable #MOTE Registered Agent signature required when reinstatings DATE				
Filing Fee is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS MGR			
NAME	MIKES, JAMES R			
STREET ADDRESS CITY-ST-ZIP	3702 W KENNEDY BLVD TAMPA, FL 33609	900109045019		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 presecute this report as required by Chapter 608, Florida Statutes.				
SIGNATURE: MUST. Muke JAMES R. MIKES 4.19.07 813.4495-4544 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Date Daylore Phone #				