2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000043039

1. Entity Name
BERNY'S DEVELOPMENT, LLC

Principal Place of Business	Mailing Address
12800 SW 188 STREET MIAMI, FL 33177	12800 SW 188 STREET MIAMI, FL 33177

DO NOT WRITE IN THIS SPACE

05052005No Chg-LLC   CR2E083 (10/03)

4. FEI Number 42-1608090	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPUZANO, BERNARDO
12800 SW 188 STREET
MIAMI, FL 33177

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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 printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by September 7, 2005

II000000265130
05/09/05-80026-017 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	CAMPUZANO, BERNARDO
STREET ADDRESS	12800 SW 188 STREET
CITY-ST-ZIP	MIAMI, FL 33177
TITLE	MGRM
NAME	PONCE, ABEL
STREET ADDRESS	12800 SW 188 STREET
CITY-ST-ZIP	MIAMI, FL 33177
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #