

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049897

FILED
Apr 08, 2005
Secretary of State

Entity Name: BE BLESSED "LLC"

Current Principal Place of Business:

115 S. MAGNOLIA AVE
SANFORD, FL 32771 SE

New Principal Place of Business:

Current Mailing Address:

2 TIMBERLINE TRAIL
APT. C
ORMOND BEACH, FL 32174 VO

New Mailing Address:

120 JUBILEE CIRCLE
DAYTONA BEACH, FL 32124 VO

FEI Number: 26-0074206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTIAGO, NARCISO SR.
VESTAVIA WAY
3512
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: SANTIAGO, LYDIA D MS.
Address: 2 C TIMBERLINE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174 VO

Title: MGRM () Delete
Name: FIGUEROA, GILFREDO JR.
Address: 2 TIMBERLINE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174 VO

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SANTIAGO, LYDIA D MS.
Address: 120 JUBILEE CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32124 VO

Title: MGRM (X) Change () Addition
Name: FIGUEROA, GILFREDO JR.
Address: 120 JUBILEE CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32124 VO

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LYDIA D. SANTIAGO

MRS.

04/08/2005

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