

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

03-15-2005 90348 021 ****50.00

DOCUMENT # L04000013506 1. Entity Name BT AIRPORT NOVELTIES LLC					
Principal Place of Business 6701 NW 7TH STREET STE 125 MIAMI, FL 33126			Mailing Address 6701 NW 7TH STREET STE 125 MIAMI, FL 33126		
2. Principal Place of Business 6950 NW 77 CT Suite, Apt. #, etc.		3. Mailing Address P.O. Box 520687 Miami, FL 33152		30003196 	
City & State Miami FL		City & State Miami, FL 33152		4. FEI Number 04-3785081	
Zip 33166		Country Miami - DAde		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent GRAYSON, MOISES T ESQ 25 SE 2ND AVENUE STE. 730 MIAMI, FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BIJOUX TERNER, INC. 6701 NW 7TH STREET STE 125 MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6950 NW 77 CT MIAMI FL 33166	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR THE ZIEGER CORPORATION 6701 NW 7TH STREET STE 125 MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6950 NW 77 CT MIAMI FL 33166	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JAKAL INVESTMENTS, INC. 6701 NW 7TH STREET STE 125 MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6950 NW 77 CT MIAMI FL 33166	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PITIS INVESTMENTS, INC. 2600 ISLAND BLVD #2006 AVENTURA, FL 33160	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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 person empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: SALOMON TURNER 3/10/05 305 266 9000					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					