2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046704

Entity Name: UDEL CATERING, L.L.C.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18851 NE 29TH AVENUE STE. 900 18851 NE 29TH AVENUE AVENTURA, FL 33180

STE. 900 AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

18851 NE 29TH AVENUE STE. 900 18851 NE 29TH AVENUE

AVENTURA, FL 33180 STE. 900 AVENTURA, FL 33180

FEI Number: 20-1313964 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROTH, LEONARDO A ESQ ROTH, LEONARDO A ESQ. C/O ROTH.ROUSSO & KATSMAN, P.A. 18851 NE 29TH AVENUE 18851 NE 29TH AVENUE STE. 900 STE. 900 AVENTURA, FL 33180 US AVENTURA, FL 33180 US

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.

City-St-Zip:

AVENTURA, FL 33180

SIGNATURE: LEONARDO A. ROTH 04/27/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

HORIGIAN, FERNANDO Name: Name: 18851 NE 29TH AVENUE STE. 900 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

Name: KOJUSNER, GASTON Name: Address: 18851 NE 29TH AVENUE STE. 900 Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

RUIZ, CARLOS Name: Name: 18851 NE 29TH AVENUE STE. 900 Address: Address:

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.

City-St-Zip:

SIGNATURE: FERNANDO HORIGIAN **MGRM** 04/27/2005