

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050791

FILED  
Apr 20, 2005  
Secretary of State

Entity Name: BERKSON GLOBAL ADVISORS, LLC

**Current Principal Place of Business:**

3300 UNIVERSITY DRIVE, SUITE 311  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

3300 UNIVERSITY DRIVE, SUITE 311  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 20-1381991

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

TURN KEY HEDGE FUNDS, INC.  
3300 UNIVERSITY DRIVE, SUITE 311  
CORAL SPRINGS, FL 33065 US

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

RIOS, DANIEL  
3300 UNIVERSITY DRIVE, SUITE 311  
CORAL SPRINGS, FL 33065 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.

SIGNATURE: DANIEL RIOS

04/20/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: RIOS, DANIEL  
Address: 3300 UNIVERSITY DRIVE, SUITE 311  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR ( ) Delete  
Name: LAZO, CARLOS  
Address: 3300 UNIVERSITY DRIVE, SUITE 311  
City-St-Zip: CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DANIEL RIOS

MGR

04/20/2005

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