

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000059702

**FILED**  
**Apr 26, 2006**  
**Secretary of State**

**Entity Name:** BG INVEST USA LLC

**Current Principal Place of Business:**

10579 US HWY 19 N  
PINELLAS PARK, FL 33782 US

**New Principal Place of Business:**

5224 102ND AVE N.  
PINELLAS PARK, FL 33782 US

**Current Mailing Address:**

10579 US HWY 19 N  
PINELLAS PARK, FL 33782 US

**New Mailing Address:**

5224 102ND AVE N.  
PINELLAS PARK, FL 33782 US

**FEI Number:** 20-1491016

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PICART, FRANCOIS  
10579 US HWY 19 N  
PINELLAS PARK, FL 33782 US

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

PICART, FRANCOIS  
5224 102ND AVE N.  
PINELLAS PARK, FL 33782 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:

04/26/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PICART, FRANCOIS  
Address: 10579 US HWY 19 N  
City-St-Zip: PINELLAS PARK, FL 33782 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PICART, FRANCOIS  
Address: 5224 102ND AVE N.  
City-St-Zip: PINELLAS PARK, FL 33782 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: FRANCOIS PICART

MGRM

04/26/2006

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