

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000030787

**FILED**  
**Apr 18, 2006**  
**Secretary of State**

**Entity Name:** BF BLIA, LLC

**Current Principal Place of Business:**

3390 MARY ST, STE 200  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

321 E HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

**FEI Number:** 20-2593053

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

STOTZER, THEODORE R  
321 E HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441 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/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: BONEFISH PARTNERS, L, LC  
Address: 3390 MARY STREET, SUITE 200  
City-St-Zip: COCONUT GROVE, FL 33133

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:** THEODORE R STOTZER

VP

04/18/2006

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