

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90297 006 ****50.00

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02062006 Chg-LLC CR2E083 (11/05)

DOCUMENT # L05000036041 1. Entity Name SONG FOODS LLC			
Principal Place of Business 1172 SOUTH DIXIE HIGHWAY, SUITE 571 CORAL GABLES, FL 33146		Mailing Address 1172 SOUTH DIXIE HIGHWAY, SUITE 571 CORAL GABLES, FL 33146	
2. Principal Place of Business 122 SW 3 Ave Suite, Apt. #, etc.	3. Mailing Address 122 SW 3 Ave Suite, Apt. #, etc.	4. FEI Number 41-2174173 Applied For <input type="checkbox"/> Not Applicable	
City & State DANIA, FL Zip 33004 Country USA	City & State DANIA, FL Zip 33004 Country USA		
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent NGUYEN, LYN 1172 SOUTH DIXIE HIGHWAY, SUITE 571 CORAL GABLES, FL 33146		7. Name and Address of New Registered Agent Name Lyn Nguyen Street Address (P.O. Box Numbers Not Acceptable) 122 SW 3 Ave City Dania FL Zip Code 33004	
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 <u>Thuong</u> 3/16/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP MGRM NGUYEN, TUNG 7500 SW 53 COURT MIAMI, FL 33143	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP →	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VP Lyn Nguyen 1850 S. Ocean Dr #4301	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP →	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP Hallandale, FL 33009	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: <u>Thuong</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		LYN NGUYEN, MGRM 3/16/06 <small>Date</small>	
		954.815. 5352 <small>Daytime Phone #</small>	

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ATTACHMENT

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City & State DANIA FL		City & State DANIA FL	
Zip 33004		Zip 33004	
Country		Country	
4. FEI Number 41-2174173		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM NGUYEN, TUNG 7500 SW 53 COURT MIAMI, FL 33143 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Lyn Nguyen 1850 S Ocean Dr #4301 Hallandale, FL 33009 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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