## 2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# L05000038779

Entity Name: BENELLE MANAGEMENT LLC

FILED Apr 11, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 201 N.W. 82 AVENUE STE 306 PLANTATION, FL 33324 **Current Mailing Address: New Mailing Address:** 201 N.W. 82 AVENUE STE 306 PLANTATION, FL 33324 FEI Number: 20-2716903 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: KLISTON, TODD W 8211 W BROWARD BLVD. STE 375 PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete REITER, BEN Z Name: Name: 201 N.W. 82 AVENUE STE 306 Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: HABER, ROCHELLE M Name: Address: 201 N.W. 82 AVENUE STE 306 Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: () Delete Title: MGRM ( ) Change (X) Addition HABER, MATTHEW S Name: Name: 201 NW 82 AVENUE STE 306 Address: Address: City-St-Zip: City-St-Zip: PLANTATION, FL 33324 Title: () Delete Title: MGRM ( ) Change (X) Addition REITER, JODI Name: Name: Address: Address: 201 NW 82 AVENUE STE 306 City-St-Zip: City-St-Zip: PLANTATION, FL 33324 Title: () Delete Title: MGRM ( ) Change (X) Addition REITER, BRITTANY Name: Name: 201 NW 82 AVENUE STE 306 Address: Address: City-St-Zip: City-St-Zip: PLANTATION, FL 33324 Title: () Delete Title: ( ) Change (X) Addition FUJITA, CAROLYN Name: Name: Address: Address: 201 NW 82 AVENUE #306 PLANTATION, FL 33324 City-St-Zip: City-St-Zip:

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: ROCHELLE M. HABER MGRM 04/11/2007