2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

Secretary of State DOCUMENT # L05000043920 06-12-2006 90336 024 ****50.00 R & B BENSON FAMILY, L.L.C. Principal Place of Business Mailing Address 8600 DUNDEE TERRACE 8600 DUNDEE TERRACE MIAMI LAKES, FL 33014 MIAMI LAKES, FL 33014 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06082006 Chg-LLC CR2E083 (11/05) 4. FEL Number 20-2983902 City & State City & State Applied For Not Applicable Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name. BENSON, RICHARD Street Address (P.O. Box Number is Not Acceptable) 8600 DUNDEE TERRACE MIAMI LAKES, FL 33014 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by September 6, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGR TITLE Addition (☐ Delete TITLE ☐ Change C. BENSON RICHARD NAME NAME Terrace 8600 Drinder STREET ADDRESS STREET ADDRESS Lakes, FL 33014 CITY-ST-ZIP CITY-ST-ZIP Miami TITLE Addition ☐ Delete TITLE MGR ☐ Change B. YUHR LYNN NAME NAME Terrace STREET ADDRESS Dundee STREET ADDRESS 8600 CITY-ST-ZIP CITY-ST-ZIP FL 33014 Lakes. Miami TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED Jun 12, 2006 8:00 am LAW OFFICE

ATTACHMENT

RARICK & ASSOCIATES, P.A.

The Colonnade at Miami Lakes 6500 Cowpen Road, Suite 204 Miami Lakes, Florida 33014

-L05006043922

Phillip B. Rarick* Astrida Rodriguez Ritu A. Mauskar Telephone (305) 556-5209 Facsimile (305) 362-9525 E-Mail: RMauskar@Raricklaw.Com Web Site: RarickLaw.Com

*Also admitted in Indiana & Virginia

Legal Assistant: Glenilda Quezada

June 8, 2006

Florida Department of State Division of Corporations P.O. Box 6478 Tallahassee, FL 32314

RE: R & B BENSON FAMILY, LLC, a Florida Limited Liability Company

Dear Sir or Madam:

My office represents Richard C. Benson, as the manager of the referenced business entity. Enclosed please find for filing:

- 2006 Limited Liability Company Annual Report
- Check for \$50.00

If you have any questions, please call my office.

Sincerely,

Ritu A. Mauskar Associate Attorney

Enclosures as stated