

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000046027

**FILED**  
**Jul 10, 2009**  
**Secretary of State****Entity Name:** BEE'S WK ENTERPRISES, LLC**Current Principal Place of Business:**4180 SAN MARINO BLVD.  
0  
WEST PALM BEACH, FL 33409**New Principal Place of Business:****Current Mailing Address:**4180 SAN MARINO BLVD.  
0  
WEST PALM BEACH, FL 33409**New Mailing Address:****FEI Number:** 20-2810174**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**KHAN, WHAZEL  
4180 SAN MARINO BLVD.  
0  
WEST PALM BEACH, FL 33409 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:** MGR ( ) Delete  
**Name:** KHAN, WHAZEL  
**Address:** 4180 SAN MARINO BLVD.  
**City-St-Zip:** WEST PALM BEACH, FL 33409**Title:** MGR ( ) Delete  
**Name:** SHANGAI, STELLA  
**Address:** 4180 SAN MARINO BLVD.  
**City-St-Zip:** WEST PALM BEACH, FL 33409**Title:** OFFI ( ) Delete  
**Name:** MEDINA, ENRIQUE OFFICER  
**Address:** 2008 LONGWOOD ROAD  
**City-St-Zip:** WEST PALM BEACH, FL 33405**ADDITIONS/CHANGES:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** OFFI (X) Change ( ) Addition  
**Name:** BENITEZ, ALEJANDRO OFFICER  
**Address:** 1500 CRESCENT ST  
**City-St-Zip:** WEST PALM BEACH, FL 33403 US

I hereby certify that the information supplied with this filing does not qualify 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: ALEJANDRO BENITEZ

OFFI

07/10/2009

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