

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

7/27/07

**FILED**  
**Aug 20, 2007 8:00 am**  
**Secretary of State**

07-27-2007 90021 001 \*\*\*\*50.00

**DOCUMENT # L05000088045**

1. Entity Name  
**BENACH TRANSPORTATION, LLC**



Principal Place of Business  
**550 BILTMORE WAY, SUIT 810  
CORAL GABLES, FL 33134**

Mailing Address  
**550 BILTMORE WAY, SUIT 810  
CORAL GABLES, FL 33134**

30014010



07032007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CHRYSTAL, NEIL R ESQ.  
550 BILTMORE WAY, SUIT 810  
CORAL GABLES, FL 33134**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BENACH, RUTH
STREET ADDRESS	10155 COLLINS AVE., #404
CITY-ST-ZIP	BAL HARBOUR, FL 33154

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
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CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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: Ruth Benach

7-17-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

**Ruth Benach, Manager**