


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000119751
1. Entry Name
MY KOSHER FOODS, LLC



Principal Place of Business 1 ALHAMBRA PLAZA SUITE 1405 CORAL GABLE, FL 33134 US	Mailing Address 1 ALHAMBRA PLAZA SUITE 1405 CORAL GABLE, FL 33134 US
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DO NOT WRITE IN THIS SPACE



03222007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-4024786	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**HINSON, JOSEPH
1 ALHAMBRA PLAZA
SUITE 1405
CORAL GABLE, 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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BERREBI, DANIEL 1 ALHAMBRA PLAZA SUITE 1405 CORAL GABLE, FL 33134
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U00000734443
05/03/07-80126-010 50.00

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: *Joseph J. Hinson* **4/23/07** **305 537-0172**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #