

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000040386

Entity Name: BFP INVESTMENTS, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

989 SE 11 PLACE
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

989 SE 11 PLACE
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 27-0141926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENNERY, RICHARD
989 SE 11 PLACE
HIALEAH, FL 33010 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: MGRM () Delete
Name: DENNERY, PIERRE R
Address: 631 NW 207 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM () Delete
Name: RIVIERE, PATRICIA B
Address: 5174 NW 113 AVE
City-St-Zip: MIAMI, FL 33178

Title: MGRM () Delete
Name: RIVIERE, FABRICE
Address: 5174 NW 113 AVE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DENNERY, PIERRE R
Address: 989 SE 11 PLACE
City-St-Zip: HIALEAH, FL 33010

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICHARD DENNERY

MGRM

04/30/2009

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