

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000046404

Entity Name: BEN PROPERTIES LLC

FILED  
Apr 25, 2008  
Secretary of State

**Current Principal Place of Business:**

2817 SW 15 STREET  
DEERFIELD BEACH, FL 33442

**New Principal Place of Business:**

**Current Mailing Address:**

2817 SW 15 STREET  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

FEI Number: 20-8952095

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

CLERVEAUX, ABNER  
2817 SW 15TH STREET  
DEERFIELD BEACH, FL 33442 US

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: ABNER CLERVEAUX

04/25/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CLERVEAUX, ABNER  
Address: 2817 SW 15 STREET  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGR ( ) Delete  
Name: CLERVEAUX, LOUIS  
Address: 2817 SW 15 STREET  
City-St-Zip: DEERFIELD BEACH, FL 33442

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: CLERVEAUX, LOUISE  
Address: 2817 SW 15 STREET  
City-St-Zip: DEERFIELD BEACH, FL 33442

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: ABNER CLERVEAUX

MGR

04/25/2008

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