2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000102250

City-St-Zip:

Entity Name: BMK INTERNATIONAL LLC

FILED Jul 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4717 NORTHEAST 11TH AVENUE FORT LAUDERDALE, FL 33334 **Current Mailing Address: New Mailing Address:** 4717 NORTHEAST 11TH AVENUE 900 SE 4TH AVE FORT LAUDERDALE, FL 33334 POMPANO BEACH, FL 33060 FEI Number: 26-3653529 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. ANTUNES, ALBERTO MGR 1840 SW 22ND ST. 4717 NORTHEAST 11TH AVENUE 4TH FLOOR FORT LAUDERDALE, FL 33334 MIAMI, FL 33145 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: ALBERTO ANTUNES 07/05/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition MGR () Delete ANTUNES, ALBERTO Name: Name: 4717 NORTHEAST 11TH AVENUE Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33334 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: MIHALKA-ANTUNES, ARIANNE Name: Address: 4717 NORTHEAST 11TH AVENUE Address: City-St-Zip: FORT LAUDERDALE, FL 33334 City-St-Zip: Title: () Delete Title: () Change () Addition MIHALKA-ANTUNES, ARIANNE Name: Name: 4717 NORTHEAST 11TH AVENUE Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33334 City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition Name: Name: KALIFE, JOSE MAURO MGR Address: Address: 4717 NE 11TH AVE City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33334 Title: () Delete Title: () Change (X) Addition ANTUNES SILVEIRA, BIANCA M Name: Name: 4717 NE 11TH AVE Address: Address:

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.

City-St-Zip:

FORT LAUDERDALE, FL 33334

SIGNATURE: ARIANNE MIHALKA-ANTUNES MGR 07/05/2009