

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000055337

Entity Name: BERRYFORMS.COM LLC

**FILED**  
**May 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4477 FOX RIDGE DRIVE  
WESTON, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

4477 FOX RIDGE DRIVE  
WESTON, FL 33331

**New Mailing Address:**

FEI Number: 27-0322279      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

SEGALL, ARIEL  
4477 FOX RIDGE DRIVE  
WESTON, FL 33331      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SEGALL, ARIEL  
Address: 4477 FOX RIDGE DRIVE  
City-St-Zip: WESTON, FL 33331

I hereby 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: ARIEL SEGALL

MD

05/05/2010

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