


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2005 08:00 AM
Secretary of State

DOCUMENT # L96000000500
 1. Entity Name
 BPI HOLDINGS, L.C.



Principal Place of Business _____ Mailing Address _____
 120 S. UNIVERSITY DR., SUITE C 120 S. UNIVERSITY DR., SUITE C
 PLANTATION, FL 33324 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE



03112005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0671510 Applied For Not Applicable
 5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 FEINSTEIN, MARVIN
 120 S. UNIVERSITY DRIVE, SUITE C
 PLANTATION, FL 33324

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2005

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | M HALEAND PARK INVESTMENTS, LTD 257 NETHERWOOD CRESCENT, HAMPSTEAD QUEBEC CANADA, H3X 3W2, |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | M YUFE, FAT 12 MINDEN ROAD HAMPSTEAD, CANADA H3X 3M4, |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | M 941478 ONTARIO, INC. 500 RUE DESLAURIERS, VILLA ST. LAURENT QUEBEC CANADA H4N 1V8, |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

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 04/12/05-80017-004 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Marvin Feinstein* 4/18/05 954423-9749
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #