2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000006734

1. Entity Name BERRY CRYSTAL, LLC

Principal Place of Business

4400 NW 19TH AVE, BAY L POMPANO BEACH, FL 33064 Mailing Address

4400 NW 19TH AVE, BAY L POMPANO BEACH, FL 33064

FILED Apr 15, 2004 08:00 AM Secretary of State



02172004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-0961187

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BERRY, DONALD MOO NIN 19TH AVE BAY !

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City - ST- ZIP

DO NOT WRITE

POMPANO BEACH, FL 33064		IN THIS SPACE	
	named entity submits this statement for the purpose of chattons of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent signature required when reinstating)	DAYE
F	iling Fee is \$50.00 ue by May 1, 2004		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS GITY-ST-ZIP	MGRM BERRY, DONALD 4400 NW 19TH AVE, BAY L POMPANO BEACH, FL 33064		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000114714 04/15/04-80061-020 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE
TITLE		I IN	THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 it 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.

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE