

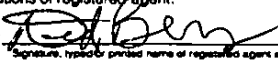


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Aug 20, 2007 8:00 am
Secretary of State

08-20-2007 90182 015 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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
DO NOT WRITE IN THIS SPACE		
8. Name and Address of Current Registered Agent BERRY, DONALD 4400 NW 19TH AVE, BAY L POMPANO BEACH, FL 33064		60054934  07192007 No Chg-LLC CR2E083 (11/05) 4. FEI Number 65-0961187 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required Applied For Not Applicable
		DO NOT WRITE IN THIS SPACE
9. 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:  8/16/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)</small> DATE		
Filing Fee is \$50.00 Due by September 14, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BERRY, DONALD 4400 NW 19TH AVE, BAY L POMPANO BEACH, FL 33064	
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DO NOT WRITE IN THIS SPACE		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  8/16/07 954-968-1901 <small>SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> Date Daytime Phone #		