

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002401

FILED
Apr 27, 2005
Secretary of State

Entity Name: DELI DYNAMICS SOUTH, LLC

Current Principal Place of Business:

8508 BENJAMIN ROAD, SUITE C
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 30719
TAMPA, FL 336303719

New Mailing Address:

FEI Number: 06-1633167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, WILLIAM S JR
8508 BENJAMIN ROAD, SUITE C
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGR () Delete
Name: LEVINE, ROBERT I
Address: 23 STRATHMORE RD
City-St-Zip: NATICK, MA 01760

Title: MGR () Delete
Name: TAYLOR, WILLIAM S JR
Address: P.O. BOX 30719
City-St-Zip: TAMPA, FL 336303719

Title: MGR () Delete
Name: PLESS, JAMES A
Address: P. O. BOX 30719
City-St-Zip: TAMPA, FL 336303719

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES A. PLESS

MGR

04/27/2005

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