

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 28, 2005 8:00 am
Secretary of State

05-12-2005 90031 034 ****50.00

DOCUMENT # M03000001322 1. Entity Name ENERGY FOODS OF AMERICA, LLC	
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Principal Place of Business 777 SOUTH FLAGLER DRIVE, EAST TOWER STE 1000 WEST PALM BEACH, FL 33401	Mailing Address 777 SOUTH FLAGLER DRIVE, EAST TOWER STE 1000 WEST PALM BEACH, FL 33401
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0000030009794



01042005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 90-0066655	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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

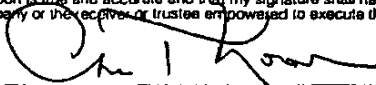
**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR NOONAN, CHARLES T 777 SOUTH FLAGLER DRIVE, EAST TOWER WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Abraham, S. Daniel 777 S. Flagler Dr., Ste. 1000E West Palm Beach, FL 33401
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Steinberg, Edward L 777 S. Flagler Dr., Ste. 1000E West Palm Beach, FL 33401
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
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 if made under oath; that I am a managing member or manager of the limited liability company or the officer or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE:  4/29/05 (501) 514-3907
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #