

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

**FILED
May 19, 2006
Secretary of State**

DOCUMENT# L03000028060

Entity Name: FRESCO'S RISTORANTE, LLC

Current Principal Place of Business:

300 SECOND AVENUE NORTHEAST
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

300 SECOND AVENUE NORTHEAST
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 20-0130794 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOCKOL, DAVID J
111 SECOND AVENUE NE
SUITE 1401
ST. PETERSBURG, FL 33701 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/MANAGERS:

Title: MGRM () Delete
Name: SOCKOL, DAVID J
Address: 300 SECOND AVENUE NORTHEAST
City-St-Zip: ST. PETERSBURG, FL 33701

Title: MEM () Delete
Name: ROBERTS, MICHAEL C
Address: 300 SECOND AVENUE NORTHEAST
City-St-Zip: ST. PETERSBURG, FL 33701

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: ORTIZ, THOMAS
Address: 300 SECOND AVENUE NORTHEAST
City-St-Zip: ST PETERSBURG, FL 33701

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: THOMAS ORTIZ

MGRM

05/19/2006

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