

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2006 8:00 am
Secretary of State

01-18-2006 90005 042 ****50.00

DOCUMENT # L04000015047					
1. Entity Name NATIONAL RETAIL CONCESSIONS, LLC					
Principal Place of Business 6910 N.W. 12TH STREET MIAMI, FL 33126 US			Mailing Address 6910 N.W. 12TH STREET MIAMI, FL 33126 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 20-1520447				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
KAYAL, RAYMOND J JR. 6910 N.W. 12TH STREET MIAMI, FL 33126			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KAYAL, JR, RAYMOND J 6910 NW 12TH STREET MIAMI, FL 33126	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	KAYAL, RAYMOND J JR 6910 NW 12th Street Miami, Florida 33126	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition			
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: <i>Raymond J. Kayal</i> 1/13/06					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					