

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000050772

1. Entity Name
EARL OF SANDWICH (TAMPA), LLC



Principal Place of Business

**2223 NORTHWEST SHORE BLVD.
INTERNATIONAL PLAZA
TAMPA, FL 33607**

Mailing Address

**7685 DEBEAUBIEN DRIVE
ORLANDO, FL 32835**



04132008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2666050

Applied For
☐ Not Applicable

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NEUKAMM, MICHAEL E
301 E. PINE STREET, SUITE 1400
ORLANDO, FL 32801**

**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

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

U000000905413
05/01/08-80053-004 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	PD
NAME	LEIGH, MONTAGUE
STREET ADDRESS	61 SUNNY GARDENS ROAD
CITY-ST-ZIP	LONDON NW4 1SJ, EN 00000
TITLE	VPST
NAME	ROSENBERG, DAVID J
STREET ADDRESS	7685 DEBEAUBIEN DRIVE
CITY-ST-ZIP	ORLANDO, FL 32835
TITLE	D
NAME	ROSENBERG, DAVID J
STREET ADDRESS	7685 DEBEAUBIEN DRIVE
CITY-ST-ZIP	ORLANDO, FL 32835
TITLE	MGRM
NAME	EMEL RESTAURANT CORPORATION
STREET ADDRESS	7685 DEBEAUBIEN DRIVE
CITY-ST-ZIP	ORLANDO, FL 32835
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

David J. Rosenberg **DAVID J. ROSENBERG** 14 April 2008 407-299-9450