

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071597

Entity Name: VIVA VINO, LLC

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

4901 VINELAND ROAD, STE 270
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

4901 VINELAND ROAD, STE 270
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 20-1698554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SENIOR, MIGUEL
4901 VINELAND ROAD, STE 270
ORLANDO, FL 32811 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: CARVALLO, WALTER
Address: 6113 LAKE BURDEN VIEW DR
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM () Delete
Name: DELFINO, DOMINGO
Address: 6125 LAKE BURDEN VIEW DR
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM () Delete
Name: USON, MARIA JOSE
Address: 5580 NW 107 AVENUE, UNIT 1207
City-St-Zip: MIAMI, FL 33178

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 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: DOMINGO DELFINO

MGRM

01/19/2009

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