

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000073736

Entity Name: SEA BREEZE RESTAURANT, LLC

**FILED**  
**May 24, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

101 S. GULFVIEW BLVD.  
CLEARWATER BEACH, FL 33767

**New Principal Place of Business:**

**Current Mailing Address:**

101 S. GULFVIEW BLVD.  
CLEARWATER BEACH, FL 33767

**New Mailing Address:**

981 CARDIGAN LANE  
PALM HARBOR, FL 34683 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

STAMATAKIS & THALJI, PL  
2701 NORTH ROCKY POINT DR  
525  
TAMPA, FL 33607 US

**Name and Address of New Registered Agent:**

SHAH, CHETAN R  
981 CARDIGAN LANE  
PALM HARBOR, FL 34683 US

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: CHETAN R. SHAH

05/24/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SHAH, CHETAN  
Address: 101 S. GULFVIEW BLVD.  
City-St-Zip: CLAEWATER BEACH, FL 33767

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SHAH, CHETAN  
Address: 981 CARDIGAN LANE  
City-St-Zip: PALM HARBOR, FL 34683 US

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: CHETAN R. SHAH

MGRM

05/24/2006

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