

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032346

Entity Name: 2 GRAMS CATERING LLC

FILED
Jul 09, 2006
Secretary of State

Current Principal Place of Business:

15024 NW 89TH STREET
ALACHUA, FL 32615

New Principal Place of Business:

2441 NW 43RD STREET
12
GAINESVILLE, FL 32606

Current Mailing Address:

15024 NW 89TH STREET
ALACHUA, FL 32615

New Mailing Address:

FEI Number: 03-0559637 FEI Number Applied For () FEI Number Not Applicable () 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:

Name and Address of New Registered Agent:

GRAHAM, JONAS D
15024 NW 89TH STREET
ALACHUA, FL 32615 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GRAHAM, JONAS D
Address: 15024 NW 89TH STREET
City-St-Zip: ALACHUA, FL 32615

Title: MGRM () Delete
Name: GRAHAM, TRACI L
Address: 15024 NW 89TH STREET
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES:

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 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: D. JONAS GRAHAM

MGRM

07/09/2006

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