2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000087820

1. Entity Name

FOOD ART BY CHARLIE, LLC



FILED Jan 09, 2007 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

33 NE 1ST AVENUE WILLISTON, FL 32696 US

is.

33 NE 1ST AVENUE WILLISTON, FL 32696 US



01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3424322

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SHARON C BRANNAN CPA PA 161 N MAIN STREET WILLISTON, FL 32696

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8. The above the obligat	named entity submits this statement for the purpose of cha- tions of registered agent.	nging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and life if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
RTLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MEIER, CHARLES_R 33 NE 1ST AVENUE WILLISTON, FL 32696		U00000579798 01/10/07-80022-007 50.00	
THILE NAME STREET ADDRESS CHY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	IN THIS SPACE	
TITLE NAME STREET_ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP			··· ·	

11. I hereby certify that the information supplied with this filling 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:

RE: Clark

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

(18/07 352-514-6657

Daytime Phone