

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000102044

FILED
Apr 29, 2007
Secretary of State

Entity Name: BAHAITINIQUE RESTAURANT AND CATERING LLC

Current Principal Place of Business:

538 WHISPERING WIND BEND
LEHIGH ACRES, FL 33936

New Principal Place of Business:

Current Mailing Address:

538 WHISPERING WIND BEND
LEHIGH ACRES, FL 33936

New Mailing Address:

FEI Number: 03-0574244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, EMMANUELLA
538 WHISPERING WIND BEND
LEHIGH ACRES, FL 33936 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: MGR () Delete
Name: PHILLIPS, EMMANUELLA
Address: 538 WHISPERING WIND BEND
City-St-Zip: LEHIGH ACRES, FL 33936

Title: MGRM () Delete
Name: PHILLIPS, MERCIDIEU
Address: 538 WHISPERING WIND BEND
City-St-Zip: LEHIGH ACRES, FL 33936

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 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: EMMANUELLA PHILLIPS

MGR

04/29/2007

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