2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000039000

1. Entity Name
WINGIN' IT IN JUNO LLC

US

Principal Place of Business

C/O HURRICANE GRILL & WINGS 4550 DONALD ROSS ROAD, #107 PALM BEACH GARDENS, FL 33418 Mailing Address

C/O HURRICANE GRILL & WINGS 4550 DONALD ROSS ROAD, #107 PALM BEACH GARDENS, FL 33418 FILED

O8 APR 11 PM 3: 22

SECRETARY OF STATE TALLAHASSEE FLORIDA



04092008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	 Applied For	
03-0598741	Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

April 9, 2008 (617)

Oaytime Phone #

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

US

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	LUTHER, SHARON			
STREET ADDRESS	4550 DONALD ROSS ROAD # 107	90012	2072244	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418		3073299 .002020 **138.75	
TITLE	MGRM	0 1,7 11 33 0.	323 323 7103110	
NAME	DICKMAN, GARY			
STREET ADDRESS	4550 DONALD ROSS ROAD, # 107			
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418	· ·		
TITLE				
NAME				
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CITY-ST-ZIP				
TITLE			. DD 4 4 2009	
NAME		M. Thomas	APR 1 4 2008	
STREET ADDRESS		4,,,		
CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filing 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 cath; 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.				

8. 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. I am familiar with, and accept

John J. Siciliano, Authorized Signatory

OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE