

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000092800

FILED  
Jan 13, 2008  
Secretary of State

Entity Name: 219 BROADWAY LLC

**Current Principal Place of Business:**

219 BROADWAY AVENUE  
KISSIMMEE, FL 34741 US

**New Principal Place of Business:**

**Current Mailing Address:**

219 BROADWAY AVENUE  
KISSIMMEE, FL 34741 US

**New Mailing Address:**

FEI Number: 26-0877516      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ROMAN, LISANDRA  
219 BROADWAY AVENUE  
KISSIMMEE, FL 34741 US

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

PINA, TERESA  
2863 MERIDIAN POINT LANE  
LAKELAND, FL 33812 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: TERESA PINA

01/13/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROMAN, LISANDRA  
Address: 711 S. EMORY AVENUE  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: TERESA RESTAURANT CO, RPORATION  
Address: 2863 MERIDIAN POINT LANE  
City-St-Zip: LAKELAND, FL 33812 US

Title: MGRM ( ) Change (X) Addition  
Name: PINA, TERESA  
Address: 2863 MERIDIAN POINT LANE  
City-St-Zip: LAKELAND, FL 33812 US

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: TERESA PINA

MGR

01/13/2008

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