

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000014372

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** ECO APPETITE, LLC

**Current Principal Place of Business:**

435 N. ANDREWS AVENUE, SUITE #2  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

435 N. ANDREWS AVENUE, SUITE #2  
FORT LAUDERDALE, FL 33301

**New Mailing Address:**

**FEI Number:** 26-2121643

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARPACILAR, MAHMUT  
435 N. ANDREWS AVENUE, SUITE #2  
FORT LAUDERDALE, FL 33301 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:** MGRM  
**Name:** ARPACILAR, MAHMUT C  
**Address:** 435 NORTH ANDREWS AVE STE 2  
**City-St-Zip:** FORT LAUDERDALE, FL 33301

**Title:** MGRM  
**Name:** SADER, CAMIL N  
**Address:** 2880 NE 14TH STREET APT 501  
**City-St-Zip:** POMPANO BEACH, FL 33062

**Title:** MGRM  
**Name:** CONDE, CESAR  
**Address:** 1861 NORTH POWERLINE ROAD UNIT G  
**City-St-Zip:** POMPANO BEACH, FL 33062

I hereby 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:** MAHMUT ARPACILAR

MGRM

03/15/2011

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