-2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 16, 2005 8:00 am Secretary of State

DOCU 1. Entity Nam 2200 GLA	ne	# M0400003 DAD, LLC			03-16-	-2005 9	0292 03	3 ***150	1.00		
Principal Place of Business 284 NEWBURY STREET			Mailing Address 284 NEWBURY STREET			-					
BOSTON, MA			BOSTON, MA 02115				IN STILL SIELL ES	iin Sani Palii	EDIN ADISA M	ia lizir yani sh	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02232005	Chg-L	rc	CR2E0	33 (10/03)	
City & State			City & State		4. FEI Numb	er EDFOR	20-14	493963	. —	optied For ot Applicable	
Zip	Country		Zip	Count		5. Certificate				\$5.00 Add Fee Require	
	6. Name	and Address of Current	Registered Agent		Name ·	7. Name and	d Address	of New Re	egistered A	gent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				Stree		ss (P.O. Box Number is Not Acceptable)					
INCOMINA	OOLL, 1 L	32301-2323									
					City		u-		FL	Zip Cod	e
8. The above the obligat	named entititions of regist	y submits this statement for tered agent.	the purpose of changing its	register	ed office or registe	red agent, or bo	oth, in the SI	tate of Flor	rida. I am fa	amiliar with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered agent a	and title if applicable. (NOT	E: Registere	ed Agent signature required	d when reinstating)			DATE		
Filing Fee is \$50.00 Due by May 1, 2005									check pa Departme	iyable to ent of State	9
9.	· · · · · · · · · · · · · · · · · · ·	MANAGING MEMBE	RS/MANAGERS	10.			ADI	DITIONS/C	CHANGES		
TITLE NAME	MGR BACK BA	AY RESTAURANT G	Delete	TITLI NAM	I					Change	Addition
STREET ADDRESS CITY-ST-ZIP	284 NEW	BURY STREET , MA 02115	11001 , 1110.	STRE	EET ADDRESS						
TITLE			☐ Delete	TITLE	1					☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP				NAM	- [
					EET ADORESS						
TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Delete	CITY	EET ADORESS '- ST-ZIP					☐ Change	☐ Addition
NAME			☐ Delete	CITY TITLI NAM	'-SI-ZIP E E					Change	Addition
		· · ·	☐ Delete	CITY TITLE NAM STRE	'-SI-ZIP E	_		- ·		Change	Addition
NAME STREET ADDRESS	-		☐ Delete	CITY TITLE NAM STRE	E : : : : : : : : : : : : : : : : : : :	-				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				CITY TITLE NAM STRE CITY TITLE	F-ST-ZIP E EET ADDRESS F-ST-ZIP E	-		- ·			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				CITY TITLE NAM STRE CITY TITLE NAM STRE	F-ST-ZIP E EET ADDRESS F-ST-ZIP E	-					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				CITY TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE TITL	F-ST-ZIP E EET ADDRESS F-ST-ZIP E EET ADDRESS F-ST-ZIP E EET ADDRESS F-ST-ZIP E	-		-			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	CITY TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM NAM NAM	F-ST-ZIP E EET ADDRESS F-ST-ZIP E EET ADDRESS F-ST-ZIP E EET ADDRESS F-ST-ZIP E	-	-			☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	CITY TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE	E ST-ZIP E SET ADDRESS -ST-ZIP E SET ADDRESS -ST-ZIP E SET ADDRESS -ST-ZIP E SET ADDRESS	-				☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			Delete	CITY TITLE NAM STRE CITY	E ST-ZIP E SET ADDRESS -ST-ZIP E SET ADDRESS -ST-ZIP E SET ADDRESS -ST-ZIP E SET ADDRESS -ST-ZIP E SET ADDRESS	-				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			Delete	CITY TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE STRE STRE STRE STRE STRE STRE STRE	E ST-ZIP E SET ADDRESS 2-ST-ZIP E SET ADDRESS 2-ST-ZIP E SET ADDRESS 2-ST-ZIP E SET ADDRESS 2-ST-ZIP E SET ADDRESS 3-ST-ZIP E SET ADDRESS 5-ST-ZIP E SET ADDRESS	-				Change	☐ Addition☐ Addition☐ Addition☐
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the	e ipformation)supplied with	Delete Delete	CITY TITLE NAM STRE CITY	E SET ADDRESS -ST-ZIP	- oction 119.07(3)	ı(i), Florida S	Statutes, 1	further cert	Change Change	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the	e information)supplied with pris true and accurate and ny or the received or trustee	Delete	CITY TITLE NAM STRE CITY	E SET ADDRESS -ST-ZIP	ection 119.07(3) nade under cat ter 608, Florida	0(i), Florida Sh; that I am Statutes.	,	further certing member	Change Change	Addition Addition