

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 01, 2006 8:00 am
Secretary of State

02-06-2006 90177 026 ****50.00

DOCUMENT # L05000016161					
1. Entity Name SMOKIN' JOE'S PUB, LLC					
Principal Place of Business 1448 MAIN STREET SARASOTA, FL 34236 US			Mailing Address 6481 TAEDA DRIVE SARASOTA, FL 34241 US		
2. Principal Place of Business		3. Mailing Address 3877 Clark Road			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Sarasota FL		4. FEI Number 20-2384379	
Zip		Country		Applied For Not Applicable	
Zip 34233		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent THOMAS C.-TYLER, JR., P.A.- 981 RIDGEWOOD AVENUE SUITE 104 VENICE, FL 34285			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when renaming) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
			MGR Tom Elliott 6481 Taeda Dr Sarasota FL 34241		
			MGR Brian Duarte 5021 Silk Oak Dr Sarasota FL 34232		
			MGR Richard Kuznetsov 2880 Lehigh Rd Sarasota FL 34234		
			MGR Joseph Harrish 1448 Main Street Sarasota FL 34236		
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 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: Thomas Elliott			2/1/06 941-927-1888		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		



ATTACHMENT

30001432

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 9, 2006

SMOKIN' JOE'S PUB, LLC
3877 CLARK RD
SARASOTA, FL 34233 US

Subject: SMOKIN' JOE'S PUB, LLC

Reference Number:

L05000016161

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE

ANNUAL REPORTS SECTION