

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000107931

**Entity Name:** QUATTROPIZZA, LLC

**Current Principal Place of Business:**

6392 N. LOCKWOOD RIDGE ROAD  
SARASOTA, FL 34243

**Current Mailing Address:**

6392 N. LOCKWOOD RIDGE ROAD  
SARASOTA, FL 34243 US

**FEI Number:** 27-3694376

**Certificate of Status Desired:** No

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

GUTIERREZ, ALEX  
6392 N. LOCKWOOD RIDGE ROAD  
SARASOTA, FL 34243 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name GUTIERREZ, ALEX  
Address 709 TREASURE BOAT WAY  
City-State-Zip: SARASOTA FL 34242

Title MGRM  
Name NIGRI, ACHILLE  
Address 1371 MAIN STREET  
City-State-Zip: SARASOTA FL 34236

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ACHILLE NIGRI

**MANAGER**

**01/15/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date