

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000130908

Entity Name: FISH RISTORANTE, LLC

Current Principal Place of Business:

4360 GULF SHORE BLVD. NORTH
#600
NAPLES, FL 34104

Current Mailing Address:

4360 GULF SHORE BLVD. NORTH
#600
NAPLES, FL 34104 US

FEI Number: 45-3843595

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SINZIERI, ALYSE
123 FORESTWOOD DR
NAPLES, FL 34110 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 SINZIERI, SALVATORE F
Address 123 FORESTWOOD DR
City-State-Zip: NAPLES FL 34110

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SALVATORE SINZIERI

MGRM

02/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date