

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000168191

**Entity Name:** TAQUERIA RESTAURANTS GROUP, LLC

**Current Principal Place of Business:**

4828 ASHFORD DUNWOODY ROAD  
SUITE 400  
ATLANTA, GA 30338

**Current Mailing Address:**

4828 ASHFORD DUNWOODY ROAD  
SUITE 400  
ATLANTA, GA 30338 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BUSINESS FILINGS INCORPORATED  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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 MGR  
Name SCHLOSSBERG, BLAIR G  
Address 4828 ASHFORD DUNWOODY ROAD,  
SUITE 400  
City-State-Zip: ATLANTA GA 30338

Title MGR  
Name LAMAstra, STEPHEN M  
Address 4828 ASHFORD DUNWOODY ROAD,  
SUITE 400  
City-State-Zip: ATLANTA GA 30338

Title MGR  
Name MANOAH, MOSHE  
Address 4828 ASHFORD DUNWOODY ROAD,  
SUITE 400  
City-State-Zip: ATLANTA GA 30338

Title MGR  
Name COLEMAN, MICHAEL  
Address 311 PINE AVE  
City-State-Zip: ANNA MARIA FL 34216

*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:** BLAIR G. SCHLOSSBERG

**MANAGER**

**04/15/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date