

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000009189

FILED
Apr 20, 2006
Secretary of State

Entity Name: FULL PLATE HOSPITALITY I, L.L.C.

Current Principal Place of Business:

605 S. FREEMONT AVENUE
SUITE B
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

605 S. FREEMONT AVENUE
SUITE B
TAMPA, FL 33606

New Mailing Address:

FEI Number: 52-2261540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKOKOS, PETER Z
1819 MAIN STREET
STE 610
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PALUZZI, PAUL
Address: 9415 BLIND PASS RD. SUITE 204
City-St-Zip: ST PETERSBURG, FL 33706

Title: MGRM () Delete
Name: MCHALE, THOMAS
Address: 5310 AMBROSE COURT
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: PAUL A. PALUZZI

MGRM

04/20/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date