

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000013572

1. Entity Name
TOTIS FAST MARKET, LLC



Principal Place of Business
**1800 SW 3RD AVE
MIAMI, FL 33129**

Mailing Address
**1800 SW 3RD AVE
MIAMI, FL 33129**



04202006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1063873

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**VARES INC
1638 CORAL WAY
MIAMI, FL 33145**

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
RIASCOS, ALFREDO
175 SE 25TH ROAD, APT. 4A
MIAMI, FL 33149**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
RIASCAS, ROSARIO
300 GALEN DRIVE #204
MIAMI, FL 33149**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
RIASLOS, LOURDES
175 SE 25TH ROAD APT. 4A
MIAMI, FL 33149**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000542101
05/10/06-80085-008 50.00

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #