

# 2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 JUN 10 AM 10:16

<b>DOCUMENT # L00000015293</b>					
<b>1. Entity Name</b> SUN-TAVERN LLC					
<b>Principal Place of Business</b> 7232 S.W. 59TH AVENUE MIAMI, FL 33143			<b>Mailing Address</b> 7230 S.W. 59TH AVENUE MIAMI, FL 33143		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b>		<b>City &amp; State</b>		<b>4. FEI Number</b> 65-1061445	
<b>Zip</b>		<b>Country</b>		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  KIRCHOFF, JANET 7230 SW 59 AVE. MIAMI, FL 33143		<b>7. Name and Address of New Registered Agent</b> Name: <u>KIRCHOFF, JAHN MATTHEW</u> Street Address (P.O. Box Number is Not Acceptable): <u>7230 S.W. 59TH AVE.</u> City: <u>MIAMI</u> FL Zip Code: <u>33143</u>			
<b>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.</b>					
SIGNATURE:		DATE: <u>6-1-08</u>			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE			
<b>Amended AR is \$50.00</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>					
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR</b> KIRCHOFF, JANET M 7230 S.W. 59TH AVENUE MIAMI, FL 33143	<input type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR</b> MALER, MICHAEL 7230 S.W. 59TH AVENUE MIAMI, FL 33143	<input type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
<b>10. ADDITIONS/CHANGES</b>					
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR</b> KIRCHOFF, JAHN MATTHEW 7230 S.W. 59TH AVE. MIAMI, FL 33143	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	200131093172 06/10/08--01004--011 **50.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>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.</b>					
<b>SIGNATURE:</b>		Date: <u>6-1-08</u> <u>305.663.4424</u>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Daytime Phone #			