2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

DOCUMENT # L01000003435

1. Entity Name APOPKA PIZZA, LLC



Principal Place of Business

APOPKA, FL 32703

205 WEST MAIN ST

Mailing Address

1326 E. LUMSDEN RD BRANDON, FL 33571

FILED Apr 04, 2007 08:00 Al Secretary of State



03132007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3702228 Applied For Not Applicable

5. Certificate of Status Desired

\$5,00 Additional Fee Required

6. Name and Address of Current Registered Agent

NORMAN, CHRISTOPHER H 315 S. HYDE PARK AVENUE TAMPA, FL 33606

SIGNATURE:

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Date

Daytime Phone #

the obligations of registered agent.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating). DATE			
•	Signature, typed or printed name or registered agent and title it applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
	iling Fee is \$50.00 ue by May 1, 2007		
9,	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAZBOUR, TAREK A 1326 E. LUMSDEN ROAD BRANDEN, FL 33571		U00000689154 04/11/07-80023-023 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CHY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET AODRESS CITY-ST-ZIP		IN	THIS SPACE
THILE NAME STREET ADDRESS CITY-ST-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby indicated	certify that the information supplied with this filing does not on this report is true and accurate and that my signature s	qualify for the exemptions contained in Chapter 1 half have the same legal effect as if made under c	19, Florida Statutes, I further certify that the information path, that I am a managing member or manager of the

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