

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 29, 2003 8:00 am
Secretary of State

01-29-2003 90042 026 ****50.00

DOCUMENT # L01000009554

1. Entity Name

CANTINA ITALIANA, LLC



Principal Place of Business

**3003 GREENE STREET
HOLLYWOOD FL 33020**

Mailing Address

**3003 GREENE STREET
HOLLYWOOD FL 33020**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1110633**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**FALICA, GIUSEPPE
3003 GREENE STREET
HOLLYWOOD FL 33020**

7. Name and Address of New Registered Agent

Name -

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
NAME **FALICA, GIUSEPPE**
STREET ADDRESS **298 NE 62ND STREET**
CITY-ST-ZIP **MIAMI FL 33138**

TITLE **MGR** ☒ Delete
NAME **PEZZATINI, DANTE**
STREET ADDRESS **298 NE 62ND STREET**
CITY-ST-ZIP **MIAMI FL 33138**

TITLE **MGR** ☐ Delete
NAME **PRESTIPINO, GIORGIO**
STREET ADDRESS **298 NE 62ND STREET**
CITY-ST-ZIP **MIAMI FL 33138**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3003 GREENE STREET**
CITY-ST-ZIP **HOLLYWOOD, FL 33020**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3003 GREENE STREET**
CITY-ST-ZIP **HOLLYWOOD, FL 33020**

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NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Giuseppe Fallica* **GIUSEPPE FALICA** 1/21/03 954-367.6777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (10/02)