## 2007 LIMITED LIABILITY COMPANY

## May 01, 2007 8:00 am Secretary of State **ANNUAL REPORT** 05-01-2007 90326 019 \*\*\*\*50.00 DOCUMENT # L01000010703 1. Entity Name MAX'S GRILLE OF MIZNER LLC Principal Place of Business Mailing Address **402 PLAZA REAL** 1371 PALMETTO PARK ROAD 60047058 BOCA RATON, FL 33432 BOCA RATON, FL 33486 04272007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1121958 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SIEGEL, NAT DO NOT WRITE 1371 PALMETTO PARK ROAD BOCA RATON, FL 33486 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 reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. TITLE NAME COSENTINO, JAMES A 4225 GENESEE STREET STREET ADDRESS CITY-ST-ZIP CHEEKTOWAGO, NY 14225 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

**FILED** 

11. I hereby certify that the information supplied with this filling 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.

NAME STREET ADDRESS

SIGNATURE: AMES TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER. OR ALITHORIZED REPRESENTATIVE