## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L01000013017

Address:

3908 MACOMB ST NW

City-St-Zip: WASHINGTON, DC 20016

Entity Name: CORAL GABLES PALM RESTAURANT, LLC

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
#140	CE DE LEON ABLES, FL 33				
Current Mailing Address:			New Mailing Address:		
1730 RHC		NT CORPORATION VE. NW, STE. 900 363101			
FEI Number	: 01-0639169	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )
Name and	Address of (	Current Registered Agent:	Name and	Address	of New Registered Agent:
1201 HAY	ATION SERVION S STREET SSEE, FL 323	CE COMPANY 012525 US			
	named entity e of Florida.	submits this statement for the	purpose of changing	its registere	ed office or registered agent, or both
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent		Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	GANZI, WALTE	BILT BEACH ROAD #108	Title: Name: Address: City-St-Zip:	8171 BAY	(X) Change ( ) Addition LTER J JR. COLONY DRIVE #1902 L 34108
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR ( LONGO, JAME 410 S WEST FALLS CHURC		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name:	MGR (X THIMM, FRED	) Delete	Title: Name:		( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

Address:

City-St-Zip:

SIGNATURE: JAMES A LONGO 04/25/2007