2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013385

Entity Name: KITCHENRITE LLC

City-St-Zip:

SARASOTA, FL 34240 US

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6222 TOWER LANE, SUITE A1 SARASOTA, FL 34240 US **Current Mailing Address: New Mailing Address:** 6222 TOWER LANE, SUITE A1 SARASOTA, FL 34240 FEI Number: 65-1127032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FORMICA, NICHOLAS P JR 3918 DAY BRIDGE PLACE ELLENTON, FL 34222 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete FORMICA, NICHOLAS P Name: Name: Address: 3918 DAY BRIDGE PLACE Address: City-St-Zip: ELLENTON, FL 34222 US City-St-Zip: Title: () Delete Title: () Change () Addition FORMICA, NICHOLAS P SR Name: Name: Address: 382 LONDONDERRY DR Address: City-St-Zip: SARASOTA, FL 34240 US City-St-Zip: Title: () Delete Title: () Change () Addition FORMICA, MILDRED C Name: Name: 382 LONDONDERRY DR Address: Address:

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.

City-St-Zip:

SIGNATURE: NICHOLAS FORMICA PRES 04/24/2008