## 2005 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT

**DOCUMENT # L01000016652** PRANZO OF MIZNER, LLC



**FILED** May 02, 2005 8:00 am Secretary of State

05-02-2005 90112 029 \*\*\*\*50.00

Principal Place of Business

**402 PLAZA REAL** BOCA RATON, FL 33432 Mailing Address

-7634 NW 6TH AVE- 1371 PAlmetto PARK R& 20052722 BOCA RATON, FL.33487 33486

01112005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1121958

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TEST NATION 1371 PAlmetto PARK Rd BOCA RATON, FL 33487

TYPED OR PRINTED NAME OF SIGNING MANAG

## DO NOT WRITE IN THIS SPACE

the obligat	ions of registered agent.  UAT  Signature, typed or printed name of registered agent and title if applicable.	SIE&EL (NOTE: Registered Agent signature required when reinstating)	4/15/05 DATE
Filing Fee is \$50.00 Due by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS		
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	P COSANTINO, JAMES A 4225 GENESEE CHEELTOLOAGA, NY 14225		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ро	NOT WRITE
TITLE NAME STREET ADDRESS   CITY-ST-ZIP		IN <sup>-</sup>	THIS SPACE
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			
TITLE 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.			