

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000003047

1. Entity Name

Gate Foods LLC



Principal Place of Business

700 11TH STREET SOUTH, PH #2
NAPLES, FL 34102-6777

Mailing Address

700 11TH STREET SOUTH, PH #2
NAPLES, FL 34102-6777

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03282006

Chg-LLC

CR2E083 (11/05)

4. FEI Number

20-0860249

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WELLINGTON SHIELD SERVICES LTD INC
700 ELEVENTH STREET SOUTH
PENTHOUSE 2
NAPLES, FL 34102-6777

7. Name and Address of New Registered Agent

Name Able Advisory INC.

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

700 Eleventh Street South, PH2

City Naples

FL

Zip Code

34102-6777

8. The above-named entity submits to the State of Florida the proposed change of 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, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE TR
NAME WELLINGTON SHIELD TRUSTEES (NE) LIMITED
STREET ADDRESS 9 PRINCES STREET
CITY-ST-ZIP AUCKLAND NEW ZEALAND.

10. ADDITIONS/CHANGES

TITLE MGR.
NAME AD MAC Ltd.
STREET ADDRESS BISON COURT
CITY-ST-ZIP Road Town, Tortola, BVI

TITLE
NAME
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption contained in Chapter 119, Florida Statutes. I further certify that the information indicated by the registered agent and authorized representative 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: *Anthony R. Able*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Telephone Number

3-28-06 239.430.4310

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Gate Foods LLC

please
file
2-16



Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

FILED

2006 MAR 30 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☒ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☒ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

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DIVISION OF CORPORATION