2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L02000010017

1. Entity Name POLK PIZZA, LLC



FILED Apr 18, 2008 08:00 Al Secretary of State

Principal Place of Business

221 COMMONWEALTH AVE. POLK CITY, FL 33868

Mailing Address

1326 EAST LUMSDEN ROAD BRANDON, FL 33511



04042008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 01-0680688

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NORMAN, CHRISTOPHER H 315 S. HYDE PARK AVE. TAMPA, FL 33606

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

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	e named entity submits this statement for the purpose of chations of registered agent.	anging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.			
	Signature, typed or printed name of registered agent and tibe if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
After May	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		U00000905757 05/01/08-80061-015 138.75
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	KAZBOUR, TALAL A		
STREET ADDRESS	1326 EAST LUMSDEN ROAD		
CITY_CT_7ID	DDANDON EL 22511		

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TITLE NAME STREET ADDRESS 11. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

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