

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000014911

Entity Name: ARCHIE'S BRICKELL, LLC

FILED
May 12, 2008
Secretary of State

Current Principal Place of Business:

50 SW 10 STREET, #46
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

1985 NW 88 CT, #201
MIAMI, FL 33172

New Mailing Address:

717 PONCE DE LEON
SUITE 212
CORAL GABLES, FL 33134

FEI Number: 51-0416551 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DIAZ-SARMIENTO, GABRIEL S CPA
1985 NW 88 CT, #201
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

VARON, MAURICIO
717 PONCE DE LEON
SUITE 212
CORAL GABLES, FL 33134 US

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: MAURICIO VARON

05/12/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MALDONADO, IGNACIO
Address: 1985 NW 88 CT, #201
City-St-Zip: MIAMI, FL 33172

Title: MGRM () Delete
Name: FOOD DEVELOPMENT COR, PORATION
Address: 1985 NW 88 CT, #201
City-St-Zip: MIAMI, FL 33172

Title: MGRM () Delete
Name: MEALS DE COLOMBIA S., A.
Address: 1985 NW 88 CT, #201
City-St-Zip: MIAMI, FL 33172

Title: P () Delete
Name: MALDONADO, IGNACIO
Address: 1985 NW 88 CT, #201
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MALDONADO, IGNACIO
Address: 717 PONCE DE LEON SUITE 212
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM (X) Change () Addition
Name: FOOD DEVELOPMENT COR, PORATION
Address: 717 PONCE DE LEON SUITE 212
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM (X) Change () Addition
Name: MEALS DE COLOMBIA S., A.
Address: 717 PONCE DE LEON SUITE 212
City-St-Zip: CORAL GABLES, FL 33134

Title: P (X) Change () Addition
Name: MALDONADO, IGNACIO
Address: 717 PONCE DE LEON SUITE 212
City-St-Zip: CORAL GABLES, FL 33134

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.

SIGNATURE: MAURICIO VARON

MR

05/12/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date