

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030751

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: CAFE DELIGHTS DORAL, LLC

**Current Principal Place of Business:**

10895 NW 41ST ST  
MIAMI, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

2620 WESTON RD  
FORT LAUDERDALE, FL 33331

**New Mailing Address:**

2620 WESTON RD  
WESTON, FL 33331

FEI Number: 75-3087774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MENESES, MAURICIO  
2620 WESTON RD  
FORT LAUDERDALE, FL 33331 US

**Name and Address of New Registered Agent:**

MENESES, MAURICIO  
2620 WESTON ROAD  
WESTON, FL 33331 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:

04/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CATALU CORPORATION  
Address: 12330 SW 53RD STREET, STE 702  
City-St-Zip: COOPER CITY, FL 33330

Title: MGR ( ) Delete  
Name: M&M COUSINS, INC  
Address: 12330 SW 53RD ST STE 702  
City-St-Zip: FORT LAUDERDALE, FL 33330

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: M&M COUSINS, INC  
Address: 2620 WESTON ROAD  
City-St-Zip: WESTON, FL 33331

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 MENESES

MM

04/17/2009

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