

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031373

FILED  
May 06, 2006  
Secretary of State

**Entity Name:** GOOD EATS OF CORAL GABLES LLC

**Current Principal Place of Business:**

1232 SOUTH DIXIE HWY  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

2655 LEJEUNE ROAD  
SUITE 804  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 46-0509516      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:**

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

KATES, LESTER G ESQ.  
2655 LEJEUNE ROAD  
SUITE 804  
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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CASTELLANOS, ERIC  
Address: 1232 SOUTH DIXIE HIGHWAY  
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM ( ) Delete  
Name: CALDWELL, JEFF  
Address: 1232 SOUTH DIXIE HIGHWAY  
City-St-Zip: CORAL GABLES, FL 33146

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFF CALDWELL

MGRM

05/06/2006

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