

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000031414

1. Entity Name
LOUIS PAPPAS MARKET CAFE' - NW, LLC



Principal Place of Business
2560 MCMULLEN BOOTH ROAD
UNIT C
CLEARWATER, FL 33761

Mailing Address
731 WESLEY AVE
TARPON SPRINGS, FL 34689



02192007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0653599

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

TATE, MARK T
212 S. MAGNOLIA AVENUE
TAMPA, FL 33606

**DO NOT WRITE
IN THIS SPACE**

8. 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. 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, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LOUIS PAPPAS RESTAURANT GROUP, LLC
STREET ADDRESS	1648 SEABREEZE DRIVE
CITY-ST-ZIP	TARPON SPRINGS, FL 34689

TITLE	
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04/26/07-80037-004 50.00

**DO NOT WRITE
IN THIS SPACE**

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 OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

LOUIS PAPPAS

4-12-07

727-937-1770

Date

Daytime Phone #