

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT # L03000005449

1. Entity Name
MARDI GRAS SALOON, LLC



FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY 15 PM 2: 58

Principal Place of Business
37 SUNDUNES CIRCLE
DAYTONA BEACH, FL 32127

Mailing Address
37 SUNDUNES CIRCLE
DAYTONA BEACH, FL 32127

2. Principal Place of Business - No P.O. Box #
500 N. Oleander Avenue

3. Mailing Address
500 N. Oleander Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Daytona Beach, Florida

City & State
Daytona Beach, Florida

04222008 Chg-LLC CR2E083 (12/06)

4. FEI Number
76-0745675

Applied For
Not Applicable

Zip
32118

Country
USA

Zip
32118

Country
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RECEL, ERGUN THOMAS
37 SUNDUNES CIRCLE
DAYTONA BEACH, FL 32127

7. Name and Address of New Registered Agent

Name
GEORGE, NICHOLAS A.
Street Address (P.O. Box Number is Not Acceptable)
500 N. Oleander Avenue

City
Daytona Beach FL Zip Code
32118

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]*
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/22/08

DATE

Amended AR is \$50.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
RECEL, ERGUN THOMAS
37 SUNDUNES CIRCLE
DAYTONA BEACH, FL 32127 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
DODAN, ARJAN
2521 N. HALIFAX AVENUE
DAYTONA BEACH, FL 32118 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
GEORGE, NICHOLAS A
500 N OLEANDER AVENUE
DAYTONA BEACH, FL 32118 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
GIIST, NIR
37 SUNDUNES CIR
PORT ORANGE, FL 32127 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
GIIST, LIYA
37 SUNDUNES CIR
PORT ORANGE, FL 32127 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
ISKENDER, TAYLAN C
6809 HENNO CT
PORT ORANGE, FL 32128 ☒ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Manager
Dodani, Arjan
2521 N. Halifax Avenue
Daytona Beach, Florida 32118 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
200129602492
05/15/08--01031--005 **50.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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]*

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

04/22/08 (386) 253-1697

Date

Daytime Phone #