

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 24, 2006 8:00 am
Secretary of State

05-24-2006 90036 012 ****50.00

DOCUMENT # L03000005731

1. Entity Name
CARMEN, THE RESTAURANT, LLC



Principal Place of Business
312 MINORCA AVENUE
CORAL GABLES, FL 33134 US

Mailing Address
312 MINORCA AVENUE
CORAL GABLES, FL 33134 US

DO NOT WRITE IN THIS SPACE



03022006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
82-0586654

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

**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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	MIKE TOMAS
STREET ADDRESS	312 MINORCA AVENUE
CITY - ST - ZIP	CORAL GABLES, FL 33134
TITLE	MGR
NAME	GONZALEZ, CARMEN
STREET ADDRESS	312 MINORCA AVENUE
CITY - ST - ZIP	CORAL GABLES, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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

MAY 18, 2006

Date

305.913.1944

Daytime Phone #