

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011919

Entity Name: 1414 - STEAK HOUSE, L.L.C.

FILED  
Apr 30, 2005  
Secretary of State

## Current Principal Place of Business:

4315 N.W. 7TH ST., STE. 21-25  
MIAMI, FL 331263562

## New Principal Place of Business:

1421 SOUTH MIAMI AVE  
MIAMI, FL 33132

## Current Mailing Address:

4315 N.W. 7TH ST., STE. 21-25  
MIAMI, FL 331263562

## New Mailing Address:

4315 NW 7TH ST  
23  
MIAMI, FL 331263562

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DARROW, KENNETH F PA  
9400 S DADELAND BLVD, PENTHOUSE 5  
DADELAND TOWERS SOUTH  
MIAMI, FL 331562844 US

## Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGR ( ) Delete  
Name: BERNASCONI, RICARDO  
Address: 4315 N.W. 7TH ST., STE. 21-25  
City-St-Zip: MIAMI, FL 331263562

Title: MGR ( ) Delete  
Name: PETKOVICH, JOSE C  
Address: 4315 N.W. 7TH ST., STE. 21-25  
City-St-Zip: MIAMI, FL 331263562

## 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 Section 119.07(3)(i), 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: JOSE PETKOVICH RICARDO BERNASCONI

MGR

04/30/2005

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