

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000025009

Entity Name: FISH & RACE, LLC

FILED
May 05, 2009
Secretary of State

Current Principal Place of Business:

5555 COLLEGE ROAD
"SHOP"
KEY WEST, FL 33040 US

New Principal Place of Business:

5555 COLLEGE ROAD
KEY WEST, FL 33040 US

Current Mailing Address:

5555 COLLEGE ROAD
"SHOP"
KEY WEST, FL 33040 US

New Mailing Address:

5555 COLLEGE ROAD
KEY WEST, FL 33040 US

FEI Number: 20-0086660 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

SPOSATO, ANNELIESE
5555 COLLEGE ROAD
"SHOP"
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

SPOSATO, ANNELIESE
5555 COLLEGE ROAD
KEY WEST, FL 33040 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: ANNELIESE SPOSATO

05/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SPOSATO, MARIO
Address: 5555 COLLEGE ROAD,
City-St-Zip: KEY WEST, FL 33040 US

Title: MGRM () Delete
Name: SPOSATO, ANNELIESE
Address: 5555 COLLEGE ROAD,
City-St-Zip: KEY WEST, FL 33040 US

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 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: ANNELIESE SPOSATO

MGRM

05/05/2009

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