

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90031 030 ****50.00

DOCUMENT # L03000026546	
1. Entity Name MARBELLA FOOD LLC	

Principal Place of Business 8872 CORAL WAY MIAMI, FL 33165	Mailing Address 8872 CORAL WAY MIAMI, FL 33165
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2. Principal Place of Business 12005 SW 117th Avenue Suite, Apt. #, etc.	3. Mailing Address 12005 SW 117th Avenue Suite, Apt. #, etc.
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City & State Miami, FL	City & State Miami, FL
Zip 33186-5218	Zip 33186-5218
Country	Country



04132005 Chg-LLC CR2E083 (10/03)

4. FEI Number 05-0578841	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent RODRIGUEZ, ANGELO G 6830 SPURRISE PLACE CORAL GABLES, FL 33133 <i>8872 SW 24TH Street Miami FL 33165</i>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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
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Filing Fee is \$50.00 Due by May 1, 2005	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RODRIGUEZ, ANGELO G <i>8872 SW 24TH ST MIAMI FL 33165</i> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RODRIGUEZ, YAMILET <i>8872 SW 24TH ST MIAMI FL 33165</i> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>ANGELO RODRIGUEZ</i>	Date 4/20/05	Daytime Phone #
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