

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037939

FILED
Apr 29, 2008
Secretary of State

Entity Name: THE DELRAY GARAGE CAFE, LLC

Current Principal Place of Business:

600 NORTH CONGRESS AVE
STE 100
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

600 NORTH CONGRESS AVE
STE 100
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 83-0372487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CIERI, ROBERT A
600 NORTH CONGRESS AVE
STE 100
DELRAY BEACH, FL 33445 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/MANAGERS:

Title: MGR () Delete
Name: CIERI, ROBERT A
Address: 600 NORTH CONGRESS AVE STE 100
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: MGR () Delete
Name: NAPOLITANO, MISTY L
Address: 600 NORTH CONGRESS AVE STE 100
City-St-Zip: DELRAY BEACH, FL 33445 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CIERI, ROBERT A
Address: 600 NORTH CONGRESS AVE STE 100
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: MGRM (X) Change () Addition
Name: NAPOLITANO, MISTY L
Address: 600 NORTH CONGRESS AVE STE 100
City-St-Zip: DELRAY BEACH, FL 33445 US

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: ROBERT A. CIERI

MGRM

04/29/2008

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