


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 18, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000039037**  
 1. Entity Name  
**CAFE ON THE BEACH, LLC**



Principal Place of Business <b>4000 GULF DRIVE HOLMES BEACH, FL 34217</b>	Mailing Address <b>4000 GULF DRIVE HOLMES BEACH, FL 34217</b>
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**DO NOT WRITE IN THIS SPACE**



01092007 No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>20-0346630</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**MENIHTAS, JOHN  
 4204 HEARTHSTONE DRIVE  
 SARASOTA, FL 34238**

**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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR MENIHTAS, JOHN 4204 HEARTHSTONE DRIVE SARASOTA, FL 34238</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR VAYIAS, TOMMY 2736 GULFGATE DRIVE SARASOTA, FL 34231</b>
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 01/18/07-80058-014 50.00

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:**  **TOMMY VAYIAS** 1-20-07 (941) 270-0328

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE PARTNER/MEMBER Daytime Phone #