

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000051044

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** MOLINO'S RISTORANTE, LLC

**Current Principal Place of Business:**

26841 SOUTH BAY DRIVE  
SUITE 159  
BONITA SPRINGS, FL 34134 US

**New Principal Place of Business:**

**Current Mailing Address:**

26841 SOUTH BAY DRIVE  
SUITE 159  
BONITA SPRINGS, FL 34134 US

**New Mailing Address:**

**FEI Number:** 20-0456091

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVID MCEL RATH, P. A.  
4501 TAMiami TRAIL NORTH  
SUITE 204  
NAPLES, FL 34103 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  
**Name:** PURISIC, NEDZAD  
**Address:** 26841 SOUTH BAY DRIVE, SUITE 159  
**City-St-Zip:** BONITA SPRINGS, FL 34134

**Title:** MGR  
**Name:** PURISIC, SAFET  
**Address:** 26841 SOUTH BAY DRIVE, SUITE 159  
**City-St-Zip:** BONITA SPRINGS, FL 34134

I hereby 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:** NEDZAD PURISIC

MGR

01/08/2010

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