2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L04000010526

Entity Name: WESTON CATERING LLC

Current Principal Place of Business:

200 BONAVENTURE BOULEVARD
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

16301 MALIBU DRIVE
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 02-4440205 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLOUGHERTY, EDWARD C
16301 MALIBU DRIVE
WESTON, FL 33326 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: MGRM ( ) Delete
Name: CLOUGHERTY, EDWARD C
Address: 16301 MALIBU DRIVE
City-St-Zip: WESTON, FL 33326 US

Title: MGR ( ) Delete
Name: WHEWELL, TIMOTHY
Address: 3255 N.W. 44TH STREET #4
City-St-Zip: FT. LAUDERDALE, FL 33309 US

Title: MGR (X) Delete
Name: KRISTOF, KRISTOPHER W
Address: 15801 W. WATERSIDE CIRCLE #104
City-St-Zip: WESTON, FL 33326 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: KRISTOF, KRISTOPHER W
Address: 15801 W. WATERSIDE CIRCLE
City-St-Zip: WESTON, FL 33326 US

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: EDWARD C. CLOUGHERTY MGRM 04/30/2009

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