2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040173

17663 SW 5 ST

PEMBROKES, FL 33029

Address:

City-St-Zip:

Entity Name: SABOR LATINO CAFE LLC

FILED Apr 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 17663 SW 5 ST PEMBROKES, FL 33029 **Current Mailing Address: New Mailing Address:** 17663 SW 5 ST PEMBROKES, FL 33029 FEI Number: 20-2617364 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AMAYA, SONIA 404 NW 68 AVENUE #207 PLANTATION, FL 33317 US 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/MEMBERS: ADDITIONS/CHANGES: Title: MGRM () Delete (X) Change () Addition REMERO, SERGIO F AMAYA, YEXON F Name: Name: 404 NW 68 AVENUE #207 Address: 17663 SW 5 STREET Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: PEMBROKE PINES, FL 33029 Title: MGRM () Delete Title: () Change () Addition AMAYA, NESTOR A Name: Name: Address: 17663 SW 5 ST Address: City-St-Zip: PEMBROKES, FL 33029 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition AMAYA, JUAN C Name: Name: Address: 17663 SW 5 ST Address: City-St-Zip: PEMBROKES, FL 33029 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: AMAYA, SONIA M Name: Address: 17663 SW 5 ST Address: City-St-Zip: PEMBROKES, FL 33029 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition AMAYA, RAFAEL A Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: NESTOR AMAYA MGRM 04/05/2005