

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040173

Entity Name: SABOR LATINO CAFE LLC

FILED
Jan 30, 2006
Secretary of State

Current Principal Place of Business:

17663 SW 5 ST
PEMBROKES, FL 33029

New Principal Place of Business:

Current Mailing Address:

17663 SW 5 ST
PEMBROKES, FL 33029

New Mailing Address:

FEI Number: 20-2617364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMAYA, SONIA
404 NW 68 AVENUE #207
PLANTATION, FL 33317 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: AMAYA, YEXON F
Address: 17663 SW 5 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM () Delete
Name: AMAYA, NESTOR A
Address: 17663 SW 5 ST
City-St-Zip: PEMBROKES, FL 33029

Title: MGRM () Delete
Name: AMAYA, JUAN C
Address: 17663 SW 5 ST
City-St-Zip: PEMBROKES, FL 33029

Title: MGRM () Delete
Name: AMAYA, SONIA M
Address: 17663 SW 5 ST
City-St-Zip: PEMBROKES, FL 33029

Title: MGRM () Delete
Name: AMAYA, RAFAEL A
Address: 17663 SW 5 ST
City-St-Zip: PEMBROKES, FL 33029

ADDITIONS/CHANGES:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: NESTOR A AMAYA

MGMR

01/30/2006

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