FILED
May 31, 2005 8:00 am
Secretary of State

04-20-2005 90035 049 ****50.00

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000052537

1. Entity Name
CAFE DELIGHTS COOPER CITY, LLC

Principal Place of Business	Mailing Address
4711 N.W. 79TH STREET, SUITE 20-T MIAMI, FL 33166	4711 N.W. 79TH STREET, SUITE 20-T MIAMI, FL 33166

300084?4

03112005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
12330 SW 53rd Street	12330 SW 53rd Street
Suite, Apt. #, etc.: Suite 702	Suite, Apt. #, etc.: Suite 702
City & State: Cooper City, Florida	City & State: Cooper City, Florida
Zip: 33330 Country: U.S.A.	Zip: 33330 Country: U.S.A.

4. FEI Number 20-1381939 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MENESES, MAURICIO
4711 N.W. 79TH STREET, SUITE 20-T
MIAMI, FL 33166

7. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable): 12330 SW 53rd street - Suite 702
City: Cooper City FL Zip Code: 33330

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: ______________________ DATE ________
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR M & M COUSINS, INC. 4711 N.W. 79TH STREET, SUITE 20-T MIAMI, FL 33166 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 12330 SW 53rd Street - Suite 702 Cooper City, FL. 33330
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR CATALU CORPORATION 4711 N.W. 79TH STREET, SUITE 20-T MIAMI, FL 33166 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 12330 SW 53rd Street - Suite 702 Cooper City, FL. 33330
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: [signature] 04/18/05 954 889 8384
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #