

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000077189

FILED  
Apr 04, 2007  
Secretary of State

Entity Name: WESTON STEAKHOUSE LLC

**Current Principal Place of Business:**

1799 BELL TOWER LANE  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1786 N COMMERCE PKWY  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 20-1794094

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROIDE, ISRAEL  
1786 N COMMERCE PKWY  
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: MGR ( ) Delete  
Name: BROIDE, GABRIEL  
Address: 11561 NW 21 CT  
City-St-Zip: PLANTATION, FL 33323

Title: MGRM ( ) Delete  
Name: BROIDE, ISRAEL  
Address: 11561 NW 21 CT  
City-St-Zip: PLANTATION, FL 33323

**ADDITIONS/CHANGES:**

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: ISRAEL BROIDE

MGRM

04/04/2007

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