


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90275 045 ****50.00

DOCUMENT # L04000087559					
1. Entity Name ITALIAN FRIENDS LLC					
Principal Place of Business 303 DUNWOODY LN HOLLYWOOD, FL 33021			Mailing Address 303 DUNWOODY LN HOLLYWOOD, FL 33021		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-1958456	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CABBANI, RONALDO 1860 SWEETBAY WAY HOLLYWOOD, FL 33019			Name <u>CABBANI, RONALDO</u> Street Address (P.O. Box Number is Not Acceptable) <u>70N HIBISCUS DR</u> City <u>MIAMI</u> FL Zip Code <u>33139</u>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CABBANI, RONALDO 1860 SWEETBAY WAY HOLLYWOOD, FL 33019	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ITALIAN INTERNATIONAL 11401 NW 12 ST STE 308 MIAMI, FL 33172	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAHAM, GABRIELA 11401 NW 12 ST STE 308 MIAMI, FL 33172	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 _____ <u>RONALDO CABBANI</u> <u>2-18-07</u> <u>954 6995763</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

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02032007 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-1958456

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CABBANI, RONALDO
1860 SWEETBAY WAY
HOLLYWOOD, FL 33019

7. Name and Address of New Registered Agent

Name CABBANI, RONALDO

Street Address (P.O. Box Number is Not Acceptable)

70N HIBISCUS DR

City MIAMI

FL

Zip Code 33139

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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9. MANAGING MEMBERS/MANAGERS

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☐ Delete

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ITALIAN INTERNATIONAL
11401 NW 12 ST STE 308
MIAMI, FL 33172

☐ Delete

TITLE
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SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #