

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087559

Entity Name: ITALIAN FRIENDS LLC

FILED  
Mar 31, 2009  
Secretary of State

**Current Principal Place of Business:**

303 DUNWOODY LN  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

12801 W SUNRISE BLVD  
651  
SUNRISE, FL 33323

**Current Mailing Address:**

303 DUNWOODY LN  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 20-1958456

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CABBANI, RONALDO  
70 N. HIBISCUS DR.  
HOLLYWOOD, FL 33019 US

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

CABBANI, RONALDO  
320 N. HIBISCUS DR.  
MIAMI BEACH, FL 33139 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: RONALDO CABBANI

03/31/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CABBANI, RONALDO  
Address: 1860 SWEETBAY WAY  
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGRM ( ) Delete  
Name: ITALIAN INTERNATIONAL, L  
Address: 11401 NW 12 ST STE 308  
City-St-Zip: MIAMI, FL 33172

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CABBANI, RONALDO  
Address: 320 N HIBISCUS DR  
City-St-Zip: MIAMI BEACH, FL 33139

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

I hereby certify that the information supplied with this filing does not qualify 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: RONALDO CABBANI

MGR

03/31/2009

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