

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008512

FILED
Apr 28, 2006
Secretary of State

Entity Name: TRATTORIA DELLA PASTA FRESCA LLC

Current Principal Place of Business:

7700 N. KENDALL DR.
SUITE 809
MIAMI, FL 33156 US

New Principal Place of Business:

930 E 16 PLACE
HIALEAH, FL 33010 US

Current Mailing Address:

7700 N. KENDALL DR.
SUITE 809
MIAMI, FL 33156 US

New Mailing Address:

930 E 16 PLACE
HIALEAH, FL 33010 US

FEI Number: 20-2239016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMARAL, BRANCA M
10913 N.E. 9TH CT.
BISCAYNE PARK, FL 33161 US

Name and Address of New Registered Agent:

BAQUES, RENE
930 E 16 PLACE
HIALEAH, FL 33010 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: RENE BAQUES

04/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CIRAULO, FABIO
Address: 7700 N. KENDALL DR., STE 809
City-St-Zip: MIAMI, FL 33156 US

Title: MGRM () Delete
Name: CESPEDES, ANNIA
Address: 7700 N. KENDALL DR., STE 809
City-St-Zip: MIAMI, FL 33156 US

Title: MGR () Delete
Name: CESPEDES, ANAIS
Address: 7700 N. KENDALL DR., STE 809
City-St-Zip: MIAMI, FL 33156 US

Title: MGRM () Delete
Name: MAZZINI, MONICA
Address: 2332 GALIANO ST
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: VERGANI, GIULIO
Address: 5737 RIVIERA DR
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CIRAULO, FABIO
Address: 930 E 16 PLACE
City-St-Zip: HIALEAH, FL 33010 US

Title: MGRM (X) Change () Addition
Name: CESPEDES, ANNIA
Address: 930 E 16 PLACE
City-St-Zip: HIALEAH, FL 33010 US

Title: MGR (X) Change () Addition
Name: CESPEDES, ANAIS
Address: 930 E 16 PLACE
City-St-Zip: HIALEAH, FL 33010 US

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: FABIO CIRAULO

MGRM

04/28/2006

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