2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000032018

1. Entity Name
SFUMATO VILLA'S, LLC



Principal Place of Business

2999 NE 191ST STREET

DILO

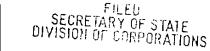
AVENTURA, FL 33180

Mailing Address

2999 NE 191ST STREET

PH-8

AVENTURA, FL 33180



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01242007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-2874797		Not Applicable
5. Certificate of Status Desired	\$5.00 Fee Re	Additional quired

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GRISALES-RACINI, OSCAR 2999 NE 191ST STREET PH-8 AVENTURA, FL 33327

DO NOT WRITE IN THIS SPACE

 The above named entity submits this statement for the purpose of changing its the obligations of registered agent. 	s registered office or registered agent, or both, in the S	tate of Florida. I am familiar with, and accept
SIGNATURE	TE. Registered Agent signature required when reinstating)	DATE

Filing Fee is \$50.00 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PERCHIK, ELIAS 2999 NE 191ST STREET PH-8 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CHY-ST-ZIP	
NAME STREET ADDRESS GUY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY ST-ZIP	
THILE NAME STREET ADDRESS CHY-ST-ZIP	

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DO NOT WRITE
IN THIS SPACE

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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

1/30/07

305)792-4911

Daytime Phone #