2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L05000078650

Entity Name: SAQUELLA CAFE BOCA, LLC

Current Principal Place of Business:

410 VIA DE PALMAS
UNIT 82
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

410 VIA DE PALMAS
UNIT 82
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 75-3198437 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEKEREL, ABRAHAM MGR
410 VIA DE PALMAS
UNIT 82
BOCA RATON, FL 33432 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: SEKEREL, ABRAHAM
Address: 410 VIA DE PALMAS
City-St-Zip: BOCA RATON, FL 33432

Title: MGRM ( ) Delete
Name: DAVIDSON, GREGORY
Address: 2600 NETHERLAND AVENUE, #820
City-St-Zip: BRONX, NY 10463

Title: MGRM (X) Delete
Name: REGEV, OMER
Address: 1632 GOLD FINCH WAY
City-St-Zip: SUNNYVALLE, CA 94087

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SEKEREL, ABRAHAM
Address: 410 VIA DE PALMAS
City-St-Zip: BOCA RATON, FL 33432

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 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: ABRAHAM SEKEREL MGRM 04/30/2009

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