2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2007
Secretary of State

DOCUMENT# L05000086861

Entity Name: SWEETERY CAFFE, LLC

Current Principal Place of Business:

1824 N.W. 108 AVE
PLANTATION, FL 33322

New Principal Place of Business:

1263 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

Current Mailing Address:

1824 N.W. 108 AVE
PLANTATION, FL 33322

New Mailing Address:

1263 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

FEI Number: 20-3411280 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAFAEL, TOM
1824 N.W. 108 AVE
PLANTATION, FL 33322 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: RAFAEL, TOM
Address: 1824 N.W. 108 AVE
City-St-Zip: PLANTATION, FL 33322

Title: MGR ( ) Delete
Name: KWASMAN, BARRY
Address: 1824 N.W. 108 AVE
City-St-Zip: PLANTATION, FL 33322

Title: MGR ( ) Delete
Name: KWASMAN, MATTHEW
Address: 1824 N.W. 108 AVE
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES:

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

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: BARRY KWASMAN MGR 01/15/2007

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