

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000090234

FILED  
Sep 05, 2006  
Secretary of State

**Entity Name:** APPETIZER'S PLUS CAFE & CATERING, LLC

**Current Principal Place of Business:**

5283 WEST ATLANTIC AVENUE  
DELRAY BEACH, FL 33484

**New Principal Place of Business:**

**Current Mailing Address:**

5283 WEST ATLANTIC AVENUE  
DELRAY BEACH, FL 33484

**New Mailing Address:**

5283 WEST ATLANTIC AVENUE  
BOOTH'S 38-41  
DELRAY BEACH, FL 33484

FEI Number: 36-4579122      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

A1A REGISTERED AGENT INC.  
92 SADBERRY ROAD  
QUINCY, FL 32351      US

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

RAFEY, ANDREW M CFO  
2246 SEAFORD DRIVE  
WELLINGTON, FL 33414      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: ANDREW M. RAFEY

09/05/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: RAFEY, CINDY J  
Address: 2246 SEAFORD DRIVE  
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM      ( ) Delete  
Name: RAFEY, ANDREW M  
Address: 2246 SEAFORD DRIVE  
City-St-Zip: WELLINGTON, FL 33414

**ADDITIONS/CHANGES:**

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: ANDREW M. RAFEY

MGRM

09/05/2006

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