

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095591

Entity Name: I.M. TAPAS, LLC

FILED  
Apr 08, 2008  
Secretary of State

**Current Principal Place of Business:**

965 4TH AVE NORTH  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

4628 CHIPPENDALE DRIVE  
NAPLES, FL 34112

**New Mailing Address:**

FEI Number: 20-3556078

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KORN, TYLER B ESQ.  
5811 PELICAN BAY BLVD.  
SUITE 209  
NAPLES, FL 34108 US

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

KORN, TYLER B ESQ.  
5150 TAMiami TRAIL N.  
SUITE 302  
NAPLES, FL 34103 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:

04/08/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: POLO, ISABEL P  
Address: 4628 CHIPPENDALE DRIVE  
City-St-Zip: NAPLES, FL 34112

Title: MGRM ( ) Delete  
Name: SHIPMAN, MARY  
Address: 4628 CHIPPENDALE DRIVE  
City-St-Zip: NAPLES, FL 34112

**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 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: MARY SHIPMAN

MGRM

04/08/2008

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