

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 18, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # L05000106424

1. Entity Name

SANTORA'S BUFFALO PIZZA & WING EST., LLC



Principal Place of Business

250 NORTH ATLANTIC AVE  
SUITE 251  
DAYTONA BEACH, FL 32124 US

Mailing Address

1473 HIGHRIDGE AVE  
DAYTONA BEACH, FL 32124 US



04072008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

20-3907194

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

KIHLBERG, RYAN P  
1473 HIGHRIDGE AVE  
DAYTONA BEACH, FL 32124

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
SANTORA, PAUL J  
74 GREEN CASTLE LN  
WILLIAMSVILLE, NY 14221

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
KIHLBERG, RYAN P  
1473 HIGHRIDGE AVE  
DAYTONA BEACH, FL 32124

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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NAME  
STREET ADDRESS  
CITY - ST - ZIP

U000000905205  
05/01/08-80043-012 138.75

**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 liability 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, OR AUTHORIZED REPRESENTATIVE

4/14/08  
Date

Daytime Phone #