


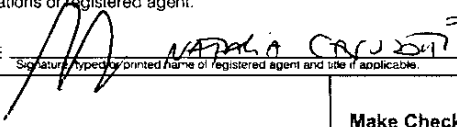
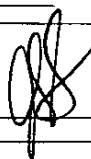
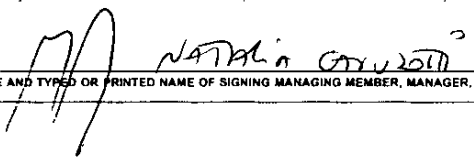
2006-2007

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**

2007 MAY 10 PM 11:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L05000117441			
1. Entity Name <b>DELICATTESSEN CAFE, LLC</b>			
<b>DO NOT WRITE IN THIS SPACE</b>			
2. Principal Place of Business <b>7904 WEST DRIVE</b>		3. Mailing Address <b>7904 WEST DRIVE</b>	
Suite, Apt. #, etc. <b>UNIT 5</b>		Suite, Apt. #, etc. <b>UNIT 5</b>	
City & State <b>NORTH BAY VILLAGE, FL</b>		City & State <b>NORTH BAY VILLAGE, FL</b>	
Zip <b>33016</b>	Country <b>USA</b>	Zip <b>33016</b>	Country <b>USA</b>
4. FEI Number <b>APPLIED FOR</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name <b>Chic Investing LLC</b>			
Street Address (P.O. Box Number is Not Acceptable) <b>7904 West Drive Unit 5</b>			
City <b>North Bay Village</b> FL Zip Code <b>33016</b>			
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 		DATE <b>4-20-2007</b>	
FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1			
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM Liliana Turano 7904 W Drive Unit 5 N Bay Village FL 33016</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>400102930884 05/21/07--01015--001 **100.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM Natalia Carusotti 7904 W Drive Unit 5 N Bay Village FL 33016</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>REINSTATEMENT 06-07</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 		Date <b>4-20-2007</b> Daytime Phone # <b>287-2092</b>	

CR2E083B (12/02)

# **DELICATTESSEN CAFE, LLC**

**7904 WEST DRIVE UNIT 5  
NORTH BAY VILLAGE FL 33016**

April 30, 2007

Division of Corporations  
Annual Report Section  
P.O. Box 6327  
Tallahassee, FL 32314

REF: DELICATTESSEN CAFE, LLC  
Document # L05000117441

Dear Sir or Madam:

Please be advised that the above-mentioned limited liability company annual report was never received for timely submission for 2006 and 2007.

Therefore, we are requesting that the delinquent fees be waived and that the limited liability company is allowed to submit a second annual report with the corresponding fee of \$50.00 per year.

Please advise.

Your cooperation is appreciated.

Sincerely,



Natalia Carusotti

NC/jr