

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000122913

Entity Name: AMIGOS SARASOTA, LLC

**FILED**  
**Jan 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

902 NORTH HIMES AVENUE  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

902 NORTH HIMES AVENUE  
TAMPA, FL 33609

**New Mailing Address:**

FEI Number: 54-2191165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HIGHAM, FREDERICK A JR., ESQ  
C/O DIVITO & HIGHAM, P.A.  
4514 CENTRAL AVE.  
ST. PETERSBURG, FL 33711 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: MGRM  
Name: ALLISON, JAY  
Address: 902 HIMES AVENUE  
City-St-Zip: TAMPA, FL 33609

Title: MGMR  
Name: GARCIA, ROBERTO  
Address: 902 NORTH HIMES AVE  
City-St-Zip: TAMPA, FL 33609

Title: MGMR  
Name: COHN, DOUGLAS B  
Address: 902 NORTH HIMES AVE  
City-St-Zip: TAMPA, FL 33609

I hereby 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: JAY ALLISON

MGRM

01/18/2010

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