

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000009492

FILED
Jan 04, 2007
Secretary of State

Entity Name: PLANET SUSHI, LLC

Current Principal Place of Business:

555 NE 15 STREET
SUITE 200
MIAMI, FL 33132 US

New Principal Place of Business:

860 WASHINGTON AVE
MIAMI BEACH, FL 33139 US

Current Mailing Address:

555 NE 15 STREET
SUITE 200
MIAMI, FL 33132 US

New Mailing Address:

FEI Number: 20-4205029 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEDARD, DENNIS R
1717 N BAYSHORE DRIVE
SUITE 215
MIAMI, FL 33132 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 () Delete
Name: TORRES, ALBAN
Address: 555 NE 15 STREET SUITE 200
City-St-Zip: MIAMI, FL 33132 US

Title: MGR () Delete
Name: CALCADA, AGOSTINHO
Address: 555 NE 15 STREET SUITE 200
City-St-Zip: MIAMI, FL 33132 US

Title: MGR () Delete
Name: PLANET SUSHI SARL,
Address: 555 NE 15 STREET SUITE 200
City-St-Zip: MIAMI, FL 33132 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: AGOSTINHO CALCADA

MNGR

01/04/2007

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