

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016583

Entity Name: PITAS & BAGELS, LLC

FILED
Apr 25, 2007
Secretary of State

Current Principal Place of Business:

7976 PINES BLVD.
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

7976 PINES BLVD.
PEMBROKE PINES, FL 33024

New Mailing Address:

8860 NW 6 ST
PEMBROKE PINES, FL 33024

FEI Number: 20-4314023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, MIGUEL E
7976 PINES BLVD.
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

GARCIA, MIGUEL E
8860 NW 6 ST
PEMBROKE PINES, FL 33024 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: MIGUEL E. GARCIA

04/25/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GARCIA, MIGUEL E
Address: 7976 PINES BLVD.
City-St-Zip: PEMBROKE PINES, FL 33024

Title: MGRM () Delete
Name: GARCIA, GLORIA E
Address: 7976 PINES BLVD.
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GARCIA, MIGUEL E
Address: 8860 NW 6 ST
City-St-Zip: PEMBROKE PINES, FL 33024

Title: MGRM (X) Change () Addition
Name: GARCIA, GLORIA E
Address: 8860 NW 6 ST
City-St-Zip: PEMBROKE PINES, FL 33024

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: MIGUEL E. GARCIA

MGRM

04/25/2007

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