

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000026774

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** GASTRO PARTNERS LLC

**Current Principal Place of Business:**

710 OAK COMMONS BLVD  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

710 OAK COMMONS BLVD  
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number:** 20-4492510

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LATEEF, SYED K M.D.  
710 OAK COMMONS BOULEVARD  
KISSIMMEE, FL 34741 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:** MGR  
**Name:** ISLAM, M. SIRAJ U MD  
**Address:** 710 OAK COMMONS BLVD  
**City-St-Zip:** KISSIMMEE, FL 34741

**Title:** MGR  
**Name:** LATEEF, SYED K MD  
**Address:** 710 OAK COMMONS BLVD  
**City-St-Zip:** KISSIMMEE, FL 34741

**Title:** MGR  
**Name:** RIVERA, JAIME M MD  
**Address:** 710 OAK COMMONS BLVD  
**City-St-Zip:** KISSIMMEE, FL 34741

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:** M SIRAJ UL ISLAM MD

MGR

04/21/2011

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