## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000045125

Entity Name: ITALIAN EATERIES, LLC

Name:

Address:

City-St-Zip:

MTB, LLC,

2750 NE 183 ST, #408

AVENTURA, FL 33160

FILED Mar 01, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2875 NE 191 ST. 7996 PINES BLVD. PEMBROKE PINES, FL 33024 304 AVENTURA, FL 33180 **New Mailing Address: Current Mailing Address:** 2875 NE 191 ST. 7996 PINES BLVD PEMBROKE PINES, FL 33024 AVENTURA, FL 33180 FEI Number: 20-4803331 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEINSTEIN, HOWARD S 2875 NE 191 ST 304 AVENTURA, FL 33180 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete SIRAGUSA, SALVATORE Name: Name: Address: 2750 NE 183 ST, #408 Address: City-St-Zip: AVENTURA, FL 33160 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: APRILE, GINO Name: Address: 210 174 ST. #1119 Address: City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WEINSTEIN,, HOWARD S Name: Name: 781 NE 199 ST., #105 Address: Address: City-St-Zip: MIAMI, FL 33179 City-St-Zip: ( ) Delete Title: MGRM Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: HOWARD S. WEINSTEIN MGRM 03/01/2007