

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054367

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: BEL COUVER RESTAURANT LLC

**Current Principal Place of Business:**

921 AVENUE D  
FORT PIERCE, FL 34950 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 696  
FORT PIERCE, FL 34954 US

**New Mailing Address:**

FEI Number: 20-2372158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DERTES, AGENA J  
942 SW LONG FELLOW RD  
PORT SAINT LUCIE, FL 34953 US

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

DERTES, JOSHUA E  
942 SW LONG FELLOW RD  
PORT SAINT LUCIE, FL 34953 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: JOSHUA E DERTES

04/27/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DERTES, JOSHUA E  
Address: 942 SW LONG FELLOW RD  
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DERTES, AGENA J  
Address: 942 SW LONG FELLOW RD  
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

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: AGENA J DERTES

MGR

04/27/2007

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