

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056612

FILED  
Aug 11, 2008  
Secretary of State

**Entity Name:** HELEN HOMES CUISINE, LLC

**Current Principal Place of Business:**

11355 S.W. 84TH STREET  
MIAMI, FL 33173

**New Principal Place of Business:**

**Current Mailing Address:**

11355 S.W. 84TH STREET  
MIAMI, FL 33173

**New Mailing Address:**

FEI Number: 20-4992663      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

ROIZ, OSCAR L  
11355 SW 84 STREET  
MIAMI, FL 33173      US

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

ROIZ, OSCAR L  
10850 SW 113 PLACE  
MIAMI, FL 33176      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:

08/11/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: D      ( ) Delete  
Name: SHAHAM, JACOB  
Address: 11355 SW 84TH STREET  
City-St-Zip: MIAMI, FL 33173

Title: D      ( ) Delete  
Name: SHAHAM, HELEN  
Address: 11355 SW 84TH STREET  
City-St-Zip: MIAMI, FL 33173

**ADDITIONS/CHANGES:**

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 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: JACOB SHAHAM

D

08/11/2008

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