

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
May 07, 2007 8:00 am
Secretary of State

04-12-2007 90183 018 ****50.00

DOCUMENT # L06000072229 1. Entity Name TK RESTAURANT VENTURES 1, LLC																																													
Principal Place of Business 6434 EMERALD DUNES #303 WEST PALM BEACH, FL 33411		Mailing Address 28 ISLEWORTH DR HENDERSON, NY 89052																																											
2. Principal Place of Business - No P.O. Box # 2751 DREW STREET Suite, Apt. #, etc.		3. Mailing Address 28 ISLEWORTH DR Suite, Apt. #, etc.																																											
City & State Clearwater, FL Zip 33765		City & State HENDERSON, NV 89052 Zip 89052																																											
Country USA		Country USA																																											
4. FEI Number 30-5346317		Applied For ☐ Not Applicable																																											
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required																																											
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																											
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)																																													
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State																																											
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> MGRM REYNAUD, JOHN A 6434 EMERALD DUNES #303 WEST PALM BEACH, FL 33411 </td> <td style="width: 10%; text-align: right;"> ☐ Delete </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM REYNAUD, JOHN A 6434 EMERALD DUNES #303 WEST PALM BEACH, FL 33411	☐ Delete																			10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> MGRM REYNAUD, JOHN A. 28 ISLEWORTH DR HENDERSON, NV 89052 </td> <td style="width: 10%; text-align: right;"> ☒ Change ☐ Addition </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM REYNAUD, JOHN A. 28 ISLEWORTH DR HENDERSON, NV 89052	☒ Change ☐ Addition																		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:		Date: 4/7/07 (702) 858-5931																																											

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