

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000072748

FILED
Jan 19, 2009
Secretary of State

Entity Name: AVENTURA TROPICAL RIBS, LLC

Current Principal Place of Business:

2688 S.W. 137 AVE.
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

2688 S.W. , 137 AVE.
MIAMI, FL 33175

New Mailing Address:

FEI Number: 20-5461845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, AVEL A
18851 NE 29 AVENUE
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

GONZALEZ, AVEL A
2688 SW 137 AVENUE
MIAMI, FL 33175 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: AVEL A. GONZALEZ

01/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GOIHMAN, RICHARD
Address: 18801 NE 29 AVE
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: LEVY, ABRAHAM
Address: 18801 NE 29 AVE
City-St-Zip: AVENTURA, FL 33180

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: ABRAHAM LEVY

MGR

01/19/2009

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