

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085046

FILED
Jan 31, 2007
Secretary of State

Entity Name: KLASSIC RESTAURANTS, L.L.C.

Current Principal Place of Business:

1271 NASHLEE DRIVE
LILBURN, GA 30047

New Principal Place of Business:

Current Mailing Address:

1271 NASHLEE DRIVE
LILBURN, GA 30047

New Mailing Address:

FEI Number: 20-5490717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHUNARA, KADIRALI
730 WEST COLONIAL DRIVE
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: CHUNARA, KADIRALI
Address: 2199 GLENMORE DRIVE
City-St-Zip: SNELLVILLE, GA 30078

Title: MGRM (X) Delete
Name: ALI, ANWAR
Address: 1271 NASHLEE DRIVE
City-St-Zip: LILBURN, GA 30047

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ALI, ANWAR
Address: 1271 NASH LEE DRIVE
City-St-Zip: LILBURN, GA 30047

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ANWAR ALI

MGRM

01/31/2007

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