

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000087925

Entity Name: CULINARY CREATIONS, LLC

FILED  
Feb 07, 2007  
Secretary of State

## Current Principal Place of Business:

5240 WELLFIELD RD.  
NEW PORT RICHEY, FL 34655

## New Principal Place of Business:

9933 MILANO DR.  
TRINITY, FL 34655

## Current Mailing Address:

5240 WELLFIELD RD.  
NEW PORT RICHEY, FL 34655

## New Mailing Address:

9933 MILANO DR.  
TRINITY, FL 34655

FEI Number: 20-5517147

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAUNDERS, NICOLE B  
5240 WELLFIELD RD.  
NEW PORT RICHEY, FL 34655 US

## Name and Address of New Registered Agent:

SAUNDERS, NICOLE B  
9933 MILANO DR.  
TRINITY, FL 34655 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:

02/07/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SAUNDERS, NICOLE B  
Address: 5240 WELLFIELD RD.  
City-St-Zip: NEW PORT RICHEY, FL 34655

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: SAUNDERS, NICOLE B  
Address: 9933 MILANO DR.  
City-St-Zip: TRINITY, FL 34655

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: NICOLE B SAUNDERS

MGR

02/07/2007

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