

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000090959

Entity Name: SOFIA'S, LLC

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

320 1ST STREET NORTH  
UNIT 812  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

320 1ST STREET NORTH  
UNIT 812  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

FEI Number: 20-5704988

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MANSUR, AL  
320 1ST ST NORTH  
#812  
JACKSONVILLE BEACH, FL 32250 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  
Name: MANSUR, AL  
Address: 320 1ST STREET NORTH, UNIT 812  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

I hereby 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: AL MANSUR

MGRM

01/10/2011

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