2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102156

Address:

City-St-Zip:

Entity Name: DONA NENA RESTAURANT L.L.C

FILED May 21, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1078 SPRING LAKE SQUARE HAINES CITY, FL 33844 **Current Mailing Address: New Mailing Address:** 2270 OLD HICKORY TREE ROAD SAINT CLOUD, FL 34772 FEI Number: 20-5826403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VILLAMIL, NANCY VALDES, LUIS A 3501 W VINE STREET 2270 OLD HICKORY TREE RD 290 SAINT CLOUD, FL 34772 KISSIMMEE, FL 34741 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: LUIS A VALDES 05/21/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete VALDES, LUIS A Name: Name: Address: 2270 OLD HICKORY TREE RD Address: City-St-Zip: SAINT CLOUD, FL 34772 City-St-Zip: Title: Title: MGR () Change (X) Addition () Delete Name: Name: VERA, ESTRELLA

Address:

City-St-Zip:

2270 OLD HICKORY TREE RD

SAINT CLOUD, FL 34772

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: LUIS A VALDES MGR 05/21/2007