

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106784

FILED  
Jul 24, 2007  
Secretary of State

Entity Name: PASSPORT PIZZA OF FLORIDA, LLC

## Current Principal Place of Business:

3100 NW BOCA RATON BLVD  
BLDG 400  
BOCA RATON, FL 33431 US

## New Principal Place of Business:

## Current Mailing Address:

3100 NW BOCA RATON BLVD  
BLDG 400  
BOCA RATON, FL 33431 US

## New Mailing Address:

3100 NW BOCA RATON BLVD  
STE 408  
BOCA RATON, FL 33431 US

FEI Number: 20-5826215      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:

BARON, MICHAEL  
3100 NW BOCA RATON BLVD  
BLDG 400  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

BARON, MICHAEL  
3100 NW BOCA RATON BLVD  
STE 408  
BOCA RATON, FL 33431 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:

07/24/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BARON, MICHAEL  
Address: 3100 NW BOCA RATON BLVD  
City-St-Zip: BOCA RATON, FL 33431 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: BARON, MICHAEL  
Address: 3100 NW BOCA RATON BLVD, #408  
City-St-Zip: BOCA RATON, FL 33431 US

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: MICHAEL BARON

MGR

07/24/2007

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