

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 16, 2008 8:00 am**  
**Secretary of State**

07-16-2008 90021 017 \*\*\*138.75

<b>DOCUMENT # L07000058344</b> 1. Entity Name <b>YANNI'S MEDITERRANEAN CUISINE, LLC</b>					
Principal Place of Business <b>11528 GRAZELEY COURT ORLANDO, FL 32837</b>			Mailing Address <b>11528 GRAZELEY COURT ORLANDO, FL 32837</b>		
2. Principal Place of Business - No P.O. Box # <b>8255 INT'L DRIVE</b>		3. Mailing Address <b>11528 GRAZELEY CT.</b>			
Suite, Apt. #, etc. <b>SUITE 140</b>		Suite, Apt. #, etc. 			
City & State <b>ORLANDO, FL</b>		City & State <b>ORLANDO FL</b>		4. FEI Number <b>11-3812062</b>	
Zip <b>32819</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>GIKAS, JOHN G 11528 GRAZELEY COURT ORLANDO, FL 32837</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008</b>		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		<b>Make check payable to Florida Department of State</b>	
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM GIKAS, JOHN G 11528 GRAZELEY COURT ORLANDO, FL 32837</b>	<input type="checkbox"/> Delete			
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<b>11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.</b>			SIGNATURE: <i>John Gikas</i> <span style="float: right;"><b>7/11/08</b></span> <span style="float: right;"><b>407-575-9223</b></span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		