2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# L07000061144

Entity Name: MIAMI CHOP HOUSE, LLC

Current Principal Place of Business:

910 LINCOLN ROAD
MIAMI BEACH, FL 33139

New Principal Place of Business:

927 LINCOLN ROAD
208
MIAMI BEACH, FL 33139

Current Mailing Address:

910 LINCOLN ROAD
MIAMI BEACH, FL 33139

New Mailing Address:

927 LINCOLN ROAD
208
MIAMI BEACH, FL 33139

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORNEK, DAVID
910 LINCOLN ROAD
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

TORNEK, DAVID
927 LINCOLN ROAD
MIAMI BEACH, FL 33139 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: 04/15/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: TORNEK, DAVID
Address: 910 LINCOLN ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete
Name: BRASEL, SEAN
Address: 910 LINCOLN ROAD
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: TORNEK, DAVID
Address: 927 LINCOLN ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM (X) Change ( ) Addition
Name: BRASEL, SEAN
Address: 927 LINCOLN ROAD
City-St-Zip: MIAMI BEACH, FL 33139

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: DAVID I. TORNEK MGRM 04/15/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date