

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000067975

Entity Name: WREST 5, LLC

FILED
Jan 31, 2009
Secretary of State

Current Principal Place of Business:

C/O ANDRES ELOY GARCIA ARZOLA
1000 NE 16TH TER
FORT LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

C/O ANDRES ELOY GARCIA ARZOLA
1000 NE 16TH TER
FORT LAUDERDALE, FL 33304 US

New Mailing Address:

FEI Number: 26-0482393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA ARZOLA, ANDRES ELOY
10362 CANOE BROOKS
BOCA RATON, FL 33498 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 () Delete
Name: JA RESTAURANT HOLDIN, GS, LLC
Address: 10829 SW 72ND ST
City-St-Zip: MIAMI, FL 33173

Title: MGR () Delete
Name: MERCADO, JHONNY A MANAGER
Address: 10496 MILBURN LANE
City-St-Zip: BOCA RATON, FL 33498

Title: MGR () Delete
Name: FUNG, VICTOR MANAGER
Address: 10362 CANOE BROOKS
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JHONNY MERCADO

MGR

01/31/2009

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