

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000100234

**FILED**  
**Jan 15, 2009**  
**Secretary of State**

**Entity Name:** A.G. RESTAURANT CONSULTING LLC

**Current Principal Place of Business:**

10 VENETIAN WAY #1403  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

1900 N. BAYSHORE DR  
1002  
MIAMI, FL 33132

**Current Mailing Address:**

10 VENETIAN WAY #1403  
MIAMI BEACH, FL 33139

**New Mailing Address:**

1900 N. BAYSHORE DR  
1002  
MIAMI, FL 33132

**FEI Number:** 32-0215922

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GALLO, ANTONIO  
10 VENETIAN WAY #1403  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

GALLO, ANTONIO  
1900 N. BAYSHORE DR  
1002  
MIAMI, FL 33132 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: ANTONIO GALLO

01/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GALLO, ANTONIO  
Address: 10 VENETIAN WAY #1403  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GALLO, ANTONIO  
Address: 1900 N. BAYSHORE DR  
City-St-Zip: MIAMI, FL 33132

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: ANTONIO GALLO

MGRM

01/15/2009

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