

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000104932

FILED
Apr 30, 2008
Secretary of State

Entity Name: EL PALACIO DE LOS MARISCOS, LLC

Current Principal Place of Business:

16480 SW 144 AVE
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

16480 SW 144 AVE
MIAMI, FL 33177

New Mailing Address:

FEI Number: 87-0814110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESPINOSA, ORLANDO M
16480 SW 144 AVE
MIAMI, FL 33177 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: ARTEAGA, ALFREDO JR.
Address: 850 W 68 ST
City-St-Zip: HIALEAH, FL 33014

Title: MGRM () Delete
Name: ESPINOSA, ORLANDO M
Address: 16480 SW 144 AVE
City-St-Zip: MIAMI, FL 33177

Title: MGRM () Delete
Name: ARTEAGA, SUSAN
Address: 850 W 68 ST
City-St-Zip: HIALEAH, FL 33014

Title: MGRM () Delete
Name: AGUDELO, ROCIO
Address: 16480 SW 144 AVE
City-St-Zip: MIAMI, FL 33177

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:

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: ORLANDO M. ESPINOSA

MGRM

04/30/2008

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