

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000120317

FILED  
Mar 10, 2008  
Secretary of State

Entity Name: DATZ DELICATESSEN, LLC

## Current Principal Place of Business:

2616 S. MACDILL AVENUE  
TAMPA, FL 33629 US

## New Principal Place of Business:

## Current Mailing Address:

2616 S. MACDILL AVENUE  
TAMPA, FL 33629 US

## New Mailing Address:

FEI Number: 26-1503008

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAY LAW GROUP, LLC  
2202 N. WESTSHORE BLVD.  
200  
TAMPA, FL 33607 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: PERRY, ROGER  
Address: 2616 S. MACDILL AVENUE  
City-St-Zip: TAMPA, FL 33629 US

Title: MGRM ( ) Delete  
Name: PERRY, SUZANNE  
Address: 2616 S. MACDILL AVENUE  
City-St-Zip: TAMPA, FL 33629 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

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

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

Title: MGRM ( ) Change (X) Addition  
Name: VIVIA'S KITCHEN, LLC,  
Address: 2616 S. MACDILL AVENUE  
City-St-Zip: TAMPA, FL 33629

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: ROGER PERRY

MGRM

03/10/2008

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