## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000005227

City-St-Zip: ORLANDO, FL 32828 US

Entity Name: LECHONERA EL BARRIO RESTAURANT LLC

FILED Feb 23, 2009 Secretary of State

| Current Principal Place of Business:          |   |                                | New Principal Plac                          | New Principal Place of Business:          |  |
|---|---|--------------------------------|---|---|--|
|   | MORAN BLVD<br>D, FL 32807                           | US                             |   |   |  |
| Current Mailing Address:                      |   |                                | New Mailing Addre                           | New Mailing Address:                      |  |
|   | HBREEZE WA<br>D, FL 32828                           | AY<br>US                       |   |   |  |
| FEI Number                                    | : 26-1757008  | FEI Number Applied For ( )     | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )         |  |
| Name and Address of Current Registered Agent: |   |                                | Name and Address                            | Name and Address of New Registered Agent: |  |
|   | Z, JULIA<br>HBREEZE W/<br>D, FL 32828               | AY<br>US                       |   |   |  |
|   | e named entity<br>e of Florida.                     | submits this statement for the | e purpose of changing its registe           | red office or registered agent, or both   |  |
| SIGNATU                                       | RE:   |                                |   |   |  |
|   | Electro   | nic Signature of Registered A  | gent  | Date                                      |  |
| MANAGING MEMBERS/MANAGERS:                    |   |                                | ADDITIONS/CHANGES:                          |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | MGRM (<br>VASQUEZ, RA<br>1344 LOCHBR<br>ORLANDO, FL | EEZE WAY                       | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                   |  |
| Title:<br>Name:<br>Address:                   | MGR (<br>VASQUEZ, JU<br>1344 LOCHBR                 |                                | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                   |  |

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: JULIA VASQUEZ MGRM 02/23/2009