

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000012292

Entity Name: VIVIA'S KITCHEN, LLC

FILED  
Jun 30, 2009  
Secretary of State

## Current Principal Place of Business:

2616 S. MACDILL AVENUE  
TAMPA, FL 33629 US

## New Principal Place of Business:

2803 SAN ISIDRO STREET  
SUITE B  
TAMPA, FL 33629 US

## Current Mailing Address:

2616 S. MACDILL AVENUE  
TAMPA, FL 33629 US

## New Mailing Address:

2803 SAN ISIDRO STREET  
SUITE B  
TAMPA, FL 33629 US

FEI Number: 26-1885672      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## 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:

GRIER, VIVIA  
2803 SAN ISIDRO STREET  
SUITE B  
TAMPA, FL 33629 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: VIVIA GRIER

06/30/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

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

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: GRIER, VIVIA  
Address: 2803 SAN ISIDRO STREET, SUITE B  
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: VIVIA GRIER

MGRM

06/30/2009

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