

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000052963

**FILED**  
**May 13, 2010**  
**Secretary of State**

**Entity Name:** CARIBBEAN FOOD FEST EXTRAVAGANZA, LLC

**Current Principal Place of Business:**

4954 N.W. 52ND AVENUE  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

4954 N.W. 52ND AVENUE  
COCONUT CREEK, FL 33073

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **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:**

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

DIAMOND, KEITH D ESQ.  
2771 EXECUTIVE PARK DRIVE, SUITE 3  
WESTON, FL 33331 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEWIS, VAL  
Address: 4954 N.W. 52ND AVENUE  
City-St-Zip: COCONUT CREEK, FL 33073

I hereby 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: VAL LEWIS

MMGR

05/13/2010

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