## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000056152

Entity Name: WAFFLE DIAMOND, LLC

FILED Mar 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8903 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

525 W. 28TH STREET MIAMI BEACH, FL 33140

FEI Number: 26-2752954 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SUSTER, EMILIO MANAGER 525 W. 28TH STREET MIAMI BEACH, FL 33140 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: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 SUSTER, EMILIO
 Name:
 SUSTER, EMILIO

 Address:
 525 W. 28TH STREET
 Address:
 525 W. 28TH STREET

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SUSTER, FORTUNA MGRM
 Name:

 Address:
 525 W. 28TH STREET
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SUSTER, ROCHELLE
 Name:

 Address:
 P.O. BOX 630653
 Address:

 City-St-Zip:
 MIAMI, FL 33163
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BEHAR, ALBERTO
 Name:

 Address:
 2225 N.E. 207 STREET
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33180
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BEHAR, KAREN
 Name:

 Address:
 2225 N.E. 207 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33180
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SEREBRENIK, RAUL & PERLA
 Name:

 Address:
 P.O. BOX 630653
 Address:

 City-St-Zip:
 MIAMI, FL 33163
 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: EMILIO SUSTER MGR 03/22/2009