

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000073185

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** ENTRE NOUS BISTRO, LLC

**Current Principal Place of Business:**

123 U.S. HWY 1  
NORTH PALM BEACH, FL 33408

**New Principal Place of Business:**

**Current Mailing Address:**

831 W. ILEX DRIVE  
LAKE PARK, FL 33403

**New Mailing Address:**

123 U.S. HWY 1  
NORTH PALM BEACH, FL 33408

**FEI Number:** 26-3086578

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHREVE, CANDIE  
831 W. ILEX DRIVE  
LAKE PARK, FL 33403 US

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

ENTRE NOUS  
123 U.S. HWY 1  
NORTH PALM BEACH, FL 33408 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:** CANDIE SHREVE

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** SHREVE, CANDIE  
**Address:** 831 W. ILEX DRIVE  
**City-St-Zip:** LAKE PARK, FL 33403

**Title:** MGR  
**Name:** LAUDENSLAGER, JASON  
**Address:** 831 W. ILEX DRIVE  
**City-St-Zip:** LAKE PARK, FL 33403

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:** CANDIE SHREVE

MGR

04/19/2011

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