

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L08000088063

**FILED**  
**Dec 03, 2009**  
**Secretary of State****Entity Name:** CIRO'S CAFFE, LLC**Current Principal Place of Business:**4419 DEL PRADO BLVD  
5  
CAPE CORAL, FL 33904 US**New Principal Place of Business:****Current Mailing Address:**4419 DEL PRADO BLVD  
5  
CAPE CORAL, FL 33904 US**New Mailing Address:****FEI Number:** 26-4469849**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**NURMOHAMED, LISA A  
1503 NE 9 STREET  
CAPE CORAL, FL 33909 US**Name and Address of New Registered Agent:**RAO, PETER D  
2494 GREENDALE PLACE  
CAPE CORAL, FL 33991 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: PETER D RAO

12/03/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**Title: MGR (X) Delete  
Name: NURMOHAMED, LISA A  
Address: 4419 DEL PRADO BLVD #5  
City-St-Zip: CAPE CORAL, FL 33904 USTitle: MGR ( ) Delete  
Name: RAO, PETER D  
Address: 4419 DEL PRADO BLVD #5  
City-St-Zip: CAPE CORAL, FL 33904 US**ADDITIONS/CHANGES:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: PETER D RAO

MNG

12/03/2009

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