

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000092746

FILED
May 18, 2009
Secretary of State

Entity Name: BUFFET INVESTMENTS, LLC

Current Principal Place of Business:

6191 W ATLANTIC BLVD.
SUITE #8
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

6191 W ATLANTIC BLVD.
SUITE #8
MARGATE, FL 33063

New Mailing Address:

FEI Number: 26-3466985 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:

Name and Address of New Registered Agent:

AR FINANCIAL SERVICES, INC.
6191 W ATLANTIC BLVD
SUITE #8
MARGATE, FL 33063 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 () Delete
Name: GALIZIA, GIOVANBATISTA
Address: 4074 W. WHITEWATER AVE.
City-St-Zip: WESTON, FL 33332

Title: MGR () Delete
Name: JIMENEZ, ALBERTO
Address: 4905 34TH ST. S BOX 114
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: MGR () Delete
Name: RIVAS, LUIS F
Address: 6947 NW 110 LANE
City-St-Zip: POMPANO BEACH, FL 33076

Title: MGR () Delete
Name: RODRIGUEZ, CARLOS
Address: 679 LAKE BLVD.
City-St-Zip: WESTON, FL 33326

Title: MGR () Delete
Name: CARDELINO, OSCAR
Address: 249 LANDING BLVD
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GIOVANBATISTA GALIZIA

MGR

05/18/2009

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