

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000097533

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** CRAVINGS ITALIAN ICE AND ICE CREAM, L.L.C.

**Current Principal Place of Business:**

10055 SUNSET STRIP  
NOB HILL PLACE  
SUNRISE, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

10081 NW 13TH STREET  
PLANTATION, FL 33322

**New Mailing Address:**

10055 SUNSET STRIP  
NOB HILL PLACE  
SUNRISE, FL 33322

**FEI Number:** 26-3546596

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PASTORESSA, ANGELO  
10081 NW 13TH STREET  
PLANTATION, FL 33322 US

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

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: MGR  
Name: PASTORESSA, ANGELO  
Address: 10081 NW 13TH STREET  
City-St-Zip: PLANTATION, FL 33322

Title: MGR  
Name: ARNEMANN, SCOTT  
Address: 405 S.PINE ISLAND RD # 401  
City-St-Zip: PLANTATION, FL 33324

Title: MGR  
Name: HOLDORF, TAMMY  
Address: 10081 NW 13TH STREET  
City-St-Zip: PLANTATION, FL 33322

Title: MGR  
Name: PASTORESSA, JAMIE  
Address: 163 OREGON AVE  
City-St-Zip: MEDFORD, NY 11763

Title: MGRM  
Name: HOLDORF, MICHAEL  
Address: 10081 NW 13TH STREET  
City-St-Zip: PLANTATION, FL 33322

Title: MGRM  
Name: ARNEMANN, TRACI  
Address: 405 S.PINE ISLAND RD # 401  
City-St-Zip: PLANTATION, FL 33324

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: ANGELO PASTORESSA

P

04/30/2010

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