

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000098128

FILED
Jan 23, 2009
Secretary of State

Entity Name: WASABI SUSHI & TEMPURA, LLC

Current Principal Place of Business:

10300 SOUTHSIDE BLVD
SUITE 3120
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

10300 SOUTHSIDE BLVD
SUITE 3120
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIN, KEJIANG
276 SCRUB JAY DR
ST AUGUSTINE, FL 32092 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 () Delete
Name: LIN, KEJIANG
Address: 276 SCRUB JAY DR.
City-St-Zip: ST AUGUSTINE, FL 32092 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: WANG, XI
Address: 1910 WELLS ROAD #VC13
City-St-Zip: ORANGE PARK, FL 32073 US

Title: MGRM () Change (X) Addition
Name: HUANG, YUFANG
Address: 8700 SOUTHSIDE BLVD. #1408
City-St-Zip: JACKSONVILLE, FL 32256 US

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: KEJIANG LIN

MGR

01/23/2009

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