

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000106903

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** CARNAVAL RESTAURANT LLC

**Current Principal Place of Business:**

3777 FOWLER STREET  
3-4-5  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

3777 FOWLER STREET  
3-4-5  
FORT MYERS, FL 33901

**New Mailing Address:**

**FEI Number:** 26-3731077

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLERVAUX, DARLINE  
3691 EVANS AVENUE  
207  
FORT MYERS, FL 33901 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:** CLERVAUX, DARLINE  
**Address:** 3691 EVANS AVENUE, SUITE 207  
**City-St-Zip:** FORT MYERS, FL 33901

**Title:** MGR  
**Name:** MALIVERT, DANIEL  
**Address:** 3777 FOWLER STREET, 3-4-5  
**City-St-Zip:** FORT MYERS, FL 33901

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:** DARLINE CLERVAUX

MEMB

03/17/2011

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