

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000108417

Entity Name: ROMAN FOODS, LLC

FILED
Aug 17, 2009
Secretary of State

Current Principal Place of Business:

547 PATIO VILLAGE WAY
WESTON, FL 33326

New Principal Place of Business:

21 SW 19TH ROAD
MIAMI, FL 33129

Current Mailing Address:

547 PATIO VILLAGE WAY
WESTON, FL 33326

New Mailing Address:

21 SW 19TH ROAD
MIAMI, FL 33129

FEI Number: FEI Number Applied For (X) 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:

GRISALES, DORIS
547 PATIO VILLAGE WAY
WESTON, FL 33326 US

Name and Address of New Registered Agent:

GRISALES, DORIS
21 SW 19TH ROAD
MIAMI, FL 33129 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: MIGUELANGE ROMAN

08/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GRISALES, DORIS
Address: 547 PATIO VILLAGE WAY
City-St-Zip: WESTON, FL 33326

Title: MGR () Delete
Name: ROMAN, MIGUELANGE
Address: 6088 LUCERNE STREET
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GRISALES, DORIS
Address: 21 SW 19TH ROAD
City-St-Zip: MIAMI, FL 33129

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: MIGUELANGE ROMAN

MGR

08/17/2009

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