

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000112746

FILED
Jan 19, 2009
Secretary of State

Entity Name: SNYDER RESTAURANT GROUP, LLC

Current Principal Place of Business:

2829 BIRD AVENUE
SUITE 112
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2829 BIRD AVENUE
SUITE 112
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 26-3846053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNYDER, TODD
2829 BIRD AVENUE
SUITE 112
COCONUT GROVE, FL 33133 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: MGRM () Delete
Name: SNYDER, TODD
Address: 2829 BIRD AVENUE, STE 112
City-St-Zip: COCONUT GROVE, FL 33133

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

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SNYDER, JESSICA M
Address: 2829 BIRD AVENUE, STE 112
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGR () Change (X) Addition
Name: INGERSOLL, TOM
Address: 2829 BIRD AVENUE, STE 112
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGR () Change (X) Addition
Name: SNYDER, TODD
Address: 2829 BIRD AVE, STE 112
City-St-Zip: COCONUT GROVE, FL 33133

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: JESSICA M SNYDER

MGRM

01/19/2009

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