

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000025861

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** MYSTERY ON THE MENU, L.L.C.

**Current Principal Place of Business:**

5701 COLLINS AVE., #410  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

5701 COLLINS AVE.,  
#410  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

5701 COLLINS AVE., #410  
MIAMI BEACH, FL 33140

**New Mailing Address:**

5701 COLLINS AVE.,  
#410  
MIAMI BEACH, FL 33140

**FEI Number:** 32-0281402

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOX, BARBARA L  
5701 COLLINS AVE., #410  
MIAMI BEACH, FL 33140 US

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

FOX, BARBARA L  
5701 COLLINS AVE.,  
#410  
MIAMI BEACH, FL 33140 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: BARBARA L FOX

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FOX, BARBARA L  
Address: 5701 COLLINS AVE., #410  
City-St-Zip: MIAMI BEACH, FL 33140

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: BARBARA L FOX

MS

04/19/2011

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