

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000025948

FILED
Apr 25, 2011
Secretary of State

Entity Name: BENT BISTRO, LLC

Current Principal Place of Business:

1314 HOMESTEAD ROAD NORTH
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

1314 HOMESTEAD ROAD NORTH
C/O JSCHAVONE LLC
LEHIGH ACRES, FL 33936 US

Current Mailing Address:

PO BOX 811
ALVA, FL 33920 US

New Mailing Address:

1314 HOMESTEAD ROAD NORTH
C/O JSCHAVONE LLC
LEHIGH ACRES, FL 33936 US

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

Name and Address of Current Registered Agent:

SCHAVONE, JOHN
406 CANTON AVE.
LEHIGH ACRES, FL 33972 US

Name and Address of New Registered Agent:

SCHAVONE, JOHN
1319 10TH STREET NORTH
NAPLES, FL 34102 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: _____

Electronic Signature of Registered Agent

04/25/2011

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: WILLIAMS, MARY BETH
Address: PO BOX 811
City-St-Zip: ALVA, FL 33920 US

Title: MGRM
Name: JSCHAVONE LLC
Address: 1319 10TH STREET NORTH
City-St-Zip: NAPLES, FL 34102 US

Title: MGRM
Name: WANES WORLD INC
Address: 2211 NE 3RD TERRACE
City-St-Zip: CAPE CORAL, FL 33909

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: JOHN SCHAVONE

MGRM

04/25/2011

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