

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000035165

Entity Name: ACROPOLIS CAFE LLC

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

515 CENTRAL AVE  
ST PETERSBURG, FL 33701 US

**New Principal Place of Business:**

**Current Mailing Address:**

515 CENTRAL AVE  
ST PETERSBURG, FL 33701 US

**New Mailing Address:**

FEI Number: 27-2238522

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FERZLI, GEORGE  
5404 HOOVER BLVD  
2  
TAMPA, FL 33634 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  
Name: WAEZ, SOUBHI  
Address: 515 CENTRAL AVE  
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: MGRM  
Name: FERZLI, GEORGE  
Address: 515 CENTRAL AVE  
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: MGRM  
Name: SABA, FADI  
Address: 515 CENTRAL AVE  
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: MGRM  
Name: ARMOUCSH, TAREK  
Address: 515 CENTRAL AVE  
City-St-Zip: ST PETERSBURG, FL 33701 US

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: SOUBHI WAEZ

MGRM

03/16/2011

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