

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000073956

**FILED**  
**Jan 22, 2011**  
**Secretary of State**

**Entity Name:** CARIBBEAN DELECTABLES LLC

**Current Principal Place of Business:**

6200 RIVER TERRACE  
TAMPA, FL 33604 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1309  
BRANDON, FL 33509 US

**New Mailing Address:**

**FEI Number:** 27-3035641

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ABRAMS, JUNE M  
6200 RIVER TERRACE  
BRANDON, FL 33604 US

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

ABRAMS, JUNE M  
6200 RIVER TERRACE  
TAMPA, FL 33604 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:**

01/22/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** ABRAMS, JUNE M  
**Address:** 6200 RIVER TERRACE  
**City-St-Zip:** TAMPA, FL 33604 US

**Title:** MGRM  
**Name:** WILLIAMS, ANDREA C  
**Address:** 9110 HIDDEN RIVER CIRCLE  
**City-St-Zip:** BRANDON, FL 33589 US

**Title:** MGRM  
**Name:** PERKINS, FRANKLYN C  
**Address:** 5125 COOPERS HAWK COURT  
**City-St-Zip:** VALRICO, FL 335967962 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:** FRANKLYN PERKINS

MGRM

01/22/2011

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