

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000098100

FILED
Jan 06, 2011
Secretary of State

Entity Name: CASUAL DINING CABANA, LLC

Current Principal Place of Business:

7389 UNIVERSAL BLVD.
SUITE 200
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

3301 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33134 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

DIFALCO & FERNANDEZ, LLLP
3301 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33134 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: CASUAL DINING MANAGER, LLC
Address: 3301 PONCE DE LEON BLVD., SUITE 200
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR
Name: DIFALCO, CHRISTOPHE L
Address: 3301 PONCE DE LEON BLVD., SUITE 200
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR
Name: CLD, LLC
Address: 4000 TOWERSIDE TERRACE, SUITE 1502
City-St-Zip: MIAMI, FL 33138 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: CHRISTOPHE L. DIFALCO MGR 01/06/2011

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