

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000118717

Entity Name: ANGELA'S SPECIALTY, LLC

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6342 NW 24TH STREET  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

6342 NW 24TH STREET  
BOCA RATON, FL 33434

**New Mailing Address:**

FEI Number: 27-3971070

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STADULIS, FRANK L  
6342 NW 24TH STREET  
BOCA RATON, FL 33434 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: MGR  
Name: STADULIS, FRANK L  
Address: 6342 NW 24TH STREET  
City-St-Zip: BOCA RATON, FL 33434

Title: MGR  
Name: STADULIS, ANGELA M  
Address: 6342 NW 24TH STREET  
City-St-Zip: BOCA RATON, FL 33434

Title: MGR  
Name: MEOLA, MIKE  
Address: 768 RED OAK DRIVE  
City-St-Zip: SCHENECTADY, NY 12309

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: FRANK STADULIS

PRES

01/05/2011

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