

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000124302

FILED
Apr 14, 2011
Secretary of State

Entity Name: CITY CREPES LLC

Current Principal Place of Business:

609 WEST UNIVERSITY AVENUE
GAINESVILLE, FL 32601 US

New Principal Place of Business:

Current Mailing Address:

3940 SW 20TH AVE
#1104
GAINESVILLE, FL 32607 US

New Mailing Address:

609 W UNIVERSITY AVE
GAINESVILLE, FL 32601 US

FEI Number: 27-4168197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELENGU, ANDI
3940 SW 20TH AVE
#1104
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

MELENGU, ANDI
609 W UNIVERSITY AVE
GAINESVILLE, FL 32601 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: ANDI MELENGU

04/14/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MELENGU, ANDI
Address: 609 W UNIVERSITY AVE
City-St-Zip: GAINESVILLE, FL 32601 US

Title: MGRM
Name: MELENGU, KEIDI
Address: 609 W UNIVERSITY AVE
City-St-Zip: GAINESVILLE, FL 32601 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: ANDI MELENGU

MGRM

04/14/2011

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