

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000016288

**Entity Name:** LIVE WELL CUISINE LLC

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1101 N FEDERAL HWY  
# 6  
LAKE WORTH, FL 33460 US

**New Principal Place of Business:**

**Current Mailing Address:**

1101 N FEDERAL HWY  
# 6  
LAKE WORTH, FL 33460 US

**New Mailing Address:**

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

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

GRIGLIK, CASIMIR 3RD  
1101 N FEDERAL HWY  
# 6  
LAKE WORTH, FL 33460 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: GRIGLIK, CASIMIR 3RD  
Address: 1101 N FEDERAL HWY - #6  
City-St-Zip: LAKE WORTH, FL 33460 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: CASIMIR GRIGLIK III

MGR.

01/18/2012

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