

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000066681

Entity Name: WHOLESOME MEAL, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8308 W. OAKLAND PARK BLVD.  
SUNRISE, FL 33351 US

**New Principal Place of Business:**

**Current Mailing Address:**

8308 W. OAKLAND PARK BLVD.  
SUNRISE, FL 33351 US

**New Mailing Address:**

FEI Number: 45-2484813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELIOT, ELISA  
9715 W. BROWARD BLVD.  
# 166  
PLANTATION, FL 33324 US

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

ELIOT, ELISA  
9715 W BROWARD BLVD  
PLANTATION, FL 33324 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/30/2012

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ELIOT, ELISA  
Address: 9715 W. BROWARD BLVD  
City-St-Zip: PLANTATION, FL 33324 US

Title: MGRM  
Name: KAHAN, PAUL  
Address: 9715 W. BROWARD BLVD  
City-St-Zip: PLANTATION, FL 33324 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: ELISA ELIOT

MGRM

04/30/2012

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