2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Apr 03, 2006 08:00 AM Secretary of State

DOCUMENT # L9800	00002615
1. Entity Name	
CAINISMILE DIZZA L.C.	4

Principal Place of Business 4928 NW 39TH AVE, GAINESVILLE, FL 32606 Mailing Address

% MANAGING FOODS, INC. 1326 E. LUMSDEN RD. BRANDON, FL 33511

01102006 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number	Applied For
	59-3544138	Not Applicable

5. Certificate of Status Desired

\$5,00 Additional Fee Required

Name and Address of Current Registered Agent

JEFFRIES, C. COLE JR. 750 WEST LUMSDEN BRANDON, FL

STREET ADDRESS CITY-ST-2IP

SIGNATURE:

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		114	IIIIO OFAGE
	e named entity submits this statement for the purpose of char tions of registered agent.	aging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: flagstered Agent signalure required when reinstaling)	- DATE
F	iling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE HAME STREET ADDRESS CITY-ST-ZIP	MGR KAZBOUR, TALAL 1326 E. LUMSDEN ROAD BRADON, FL 33571		
TITLE NAME STREET ADDRESS CITY-ST-2IP			000000490414 04/18/06-80054-010 S0.00
THE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-DP			
TITLE NAME			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this feport is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a managing member or manager of the limited liability dempany or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE