


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 24, 2006 8:00 am**  
**Secretary of State**

01-24-2006 90041 038 \*\*\*\*50.00

<b>DOCUMENT # L99000000041</b> 1. Entity Name DUOMO FOOD CONCEPTS - DORAL L.L.C.	
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Principal Place of Business 10650 N.W. 41ST STREET <del>STE 600</del> MIAMI, FL 33178	Mailing Address 10650 N.W. 41ST STREET MIAMI, FL 33178
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*here is  
Please correct Address Not Suite*

**20002463**



01092006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0900882	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  CORPORATION COMPANY OF MIAMI 1500 MIAMI CENTER, 201 S. BISCAYNE BLVD. MIAMI, FL 33131
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PALENZONA, ROMANO 10540 NW 26 CT STE G-203 MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PALENZONA, PATRIZIA 10540 NW 26 CT STE G-203 MIAMI, FL 33172
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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 report is true and accurate and that my 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: <u>Patrizia Palenzona</u> <u>PATRIZIA PALENZONA</u>	<u>1/13/06</u> <u>(305) 718-4148</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date Daytime Phone #</small>