

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Apr 11, 2008 08:00 A.
Secretary of State**

DOCUMENT # M00000001386

1. Entity Name
CAMBRIDGE MEXICAN FOODS, LLC



Principal Place of Business

**12089 GAYTON ROAD
RICHMOND, VA 23238 US**

Mailing Address

**12089 GAYTON ROAD
RICHMOND, VA 23238 US**



04012008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
91-2053730

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LLEVAT, HERMINIO C
1050 NW 13TH ST., #287D
BOCA RATON, FL 33486**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME LLEVAT, HERMINIO C
STREET ADDRESS 11995 EL CAMINO REAL SUITE 304
CITY-ST-ZIP SAN DIEGO, CA 92130

TITLE MGR
NAME CHRISTODOULO, GEORGE E
STREET ADDRESS 88 BLACK FALCON AVE., SUITE 345
CITY-ST-ZIP BOSTON, MA 02210

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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U000000091833
04/23/08-80040-005 138.75

**DO NOT WRITE
IN THIS SPACE**

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: _____

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

Juliette Gomez

4/04/08

Date

(804)726-4620

Daytime Phone #