

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001921

Entity Name: BELLA BRAVA LLC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

515 CENTRAL AVE
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

PO BOX 3131
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 36-4552499

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENTURO, MICHAEL
515 CENTRAL AVENUE
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

SANDERSON, ROBERT
515 CENTRAL AVENUE
ST. PETERSBURG, FL 33701 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: ROBERT SANDERSON

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SANDERSON, ROBERT L
Address: 288 BEACH DRIVE NE, PH1
City-St-Zip: ST. PETERSBURG, FL 33701

Title: MGR () Delete
Name: CRAIG, BRANDYCE
Address: 288 BEACH DRIVE NE, PH1
City-St-Zip: ST. PETERSBURG, FL 33701

Title: MGR () Delete
Name: VENTURO, MICHAEL
Address: 924 7TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33701

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ROBERT SANDERSON

MGRM

04/27/2009

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