


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # M07000004382

1. Entity Name
ART RESTAURANTS FLORIDA, LLC



Principal Place of Business
**1024 SERPENTINE LANE, STE 101
 PLEASANTON, CA 94566**

Mailing Address
**1024 SERPENTINE LANE, STE 101
 PLEASANTON, CA 94566**

DO NOT WRITE IN THIS SPACE



01032008No Chg-LLC CR2E083 (12/07)

4. FEI Number 32-0204364	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

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

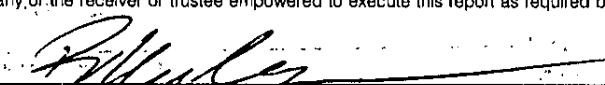

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DHILLON, AJAY 1024 SERPENTINE LANE, STE 101 PLEASANTON, CA 94566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MUMTAZ, TABBASSUM 1024 SERPENTINE LANE, STE 101 PLEASANTON, CA 94566
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 02/13/08-80069-018-138.75

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 Date Daytime Phone #