

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000023695

**Entity Name:** LES VIOLINS RESTAURANT, INC.

**Current Principal Place of Business:**

2800 PONCE DE LEON BLVD. #1125  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2801 N.E. 208TH TERR  
SUITE 102  
AVENTURA, FL 33180

**FEI Number:** 65-0992927

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BREIER, ROBERT G  
2800 PONCE DE LEON BLVD. #1125  
CORAL GABLES, FL 33134 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            D  
Name            SILVERMAN, BARRY J  
Address        2801 N.E. 208TH TERR SUITE 102  
City-State-Zip: AVENTURA FL 33180

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BARRY J SILVERMAN

**DIRECTOR**

**02/28/2014**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date