

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000064655

**Entity Name:** SUNRISE PIZZA LLC

**Current Principal Place of Business:**

11890 SW 8 STREET  
202  
MIAMI, FL 33184

**FILED**  
**Apr 15, 2014**  
**Secretary of State**  
**CC2638157377**

**Current Mailing Address:**

11890 SW 8 STREET  
202  
MIAMI, FL 33184 US

**FEI Number:** 68-0681049

**Certificate of Status Desired:** No

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

BIZCPAS LLP  
1300 NW 84TH AVE  
MIAMI, FL 33126 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

**Authorized Person(s) Detail :**

Title MGRM  
Name CERUTTI, JOHN  
Address 11890 SW 8TH STREET  
STE 202  
City-State-Zip: MIAMI FL 33184

Title MGRM  
Name RANIERI, LUIGI  
Address 11890 SW 8 STREET SUITE 202  
City-State-Zip: MIAMI FL 33184

Title MGRM  
Name CERUTTI, FRANCISCO  
Address 11890 SW 8 STREET #202  
City-State-Zip: MIAMI FL 33184

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUIGI RANIERI

**MEMBER**

**04/15/2014**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date