

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000139960

**FILED**  
**Apr 23, 2015**  
**Secretary of State**  
**CC5732381878**

**Entity Name:** PERUVIAN CUISINE MIAMI LLC

**Current Principal Place of Business:**

17040 COLLINS AVENUE  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

17040 COLLINS AVENUE  
SUNNY ISLES BEACH, FL 33160

**FEI Number:** 99-0371589

**Certificate of Status Desired:** No

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

MENDOZA, EPIFANIO  
18541 N BAY RD  
SUNNY ISLES, FL 33160 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 MENDOZA, CIRO  
Address 18541 N BAY RD  
City-State-Zip: SUNNY ISLES FL 33160

Title MGRM  
Name MENDOZA, EPIFANIO  
Address 18541 N BAY RD  
City-State-Zip: SUNNY ISLES FL 33160

Title MGRM  
Name NEGOCIACIONES SANTA CRUZ  
Address CA EL GRIFO 111 URB CAMPOVERDE  
City-State-Zip: LA MOLINA LIMA PERU

*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:** EPIFANIO MENDOZA

MGRM

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date