

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000129829

**Entity Name:** 5PLUS5 RESTAURANT GROUP, LLC

**Current Principal Place of Business:**

20967 US HWY 19 N  
CLEARWATER, FL 33765

**Current Mailing Address:**

3 CHAMPLAIN  
IRVINE, CA 92620

**FEI Number:** 83-0674548

**Certificate of Status Desired:** No

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

LEE, PAUL  
1380 GULF BLVD  
UNIT 1208  
CLEARWATER, FL 33767 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	MGR	Title	MGR
Name	LEE, PAUL	Name	ESTEVEZ, PAUL
Address	3 CHAMPLAIN	Address	2432 MARTES
City-State-Zip:	IRVINE CA 92620	City-State-Zip:	LA VERNE CA 91750

*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:** PAUL LEE

**MANAGING MEMBER**

**01/10/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date