## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#821289** 

Entity Name: RESTAURANT ASSOCIATES INDUSTRIES INC.

FILED Apr 25, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
% RESTAURANT ASSOCIATES 120 WEST 45TH ST. NEW YORK, NY 10036			5TH FLOO	C/O 330 FIFTH AVENUE 5TH FLOOR NEW YORK, NY 10001		
Current Mailing Address:			New Maili	New Mailing Address:		
C/O TAX DEPT 2400 YORKMONT RD. CHARLOTTE, NC 28217						
FEI Number:	13-2624705	FEI Number Applied For ( ) FEI N	umber Not Appl	icable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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		
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PS () E JONES, LAUREN 120 WEST 45TH NEW YORK, NY	STREET	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition JONES, LAURENCE 120 WEST 45TH STREET NEW YORK, NY 10036		
Title: Name: Address: City-St-Zip:	AS () DELANO, DEBOR 2400 YORKMON' CHARLOTTE, NO	T RD.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T () E FORREST, JOHN 38 NORFOLK AV MAPLEWOOD, N	E	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	AS ()E ROSSITCH, RICH 2400 YORKMON CHARLOTTE, NO	T RD.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	AS () E THARINGTON, NI 2400 YORKMON CHARLOTTE, NO	T RD.	Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition ZAUF, GARY 2400 YORKMONT RD. CHARLOTTE, NC 28217		
Title: Name: Address:	SVP () E WELLS, C. PHILI 2400 YORKMON		Title: Name: Address:	DVPS (X) Change ( ) Addition WELLS, C. PHILLIP 2400 YORKMONT ROAD		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

CHARLOTTE, NY 28217

SIGNATURE: C PHILLIP WELLS DVPS 04/25/2009

CHARLOTTE, NY 28217

City-St-Zip: