

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046464

FILED
Apr 16, 2006
Secretary of State

Entity Name: SCS RESTAURANT GROUP, INC.

Current Principal Place of Business:

957 WICKETURN DRIVE
BRANDON, FL 33510

New Principal Place of Business:

5008 WEST LINEBAUGH AVENUE
SUITE 20
TAMPA, FL 33624

Current Mailing Address:

957 WICKETURN DRIVE
BRANDON, FL 33510

New Mailing Address:

957 WICKETRUM DRIVE
BRANDON, FL 33510

FEI Number: 59-3644679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMAN, JOSE I
957 WICKETRON DRIVE
BRANDON, FL 33510 US

Name and Address of New Registered Agent:

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:

Title: PSD () Delete
Name: PASQUINI, LAWRENCE D
Address: 957 WICKETURN DRIVE
City-St-Zip: BRANDON, FL 33510

Title: VTD () Delete
Name: PASQUINI, BARBARA A
Address: 957 WICKETURN DRIVE
City-St-Zip: BRANDON, FL 33510

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: LAWRENCE D.PASQUINI

PSD

04/16/2006

Electronic Signature of Signing Officer or Director

_____ Date