


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000084878

1. Entity Name
SALT WATER GRILL, INC.



Principal Place of Business
**5654 CYPRESS GARDENS BLVD
 WINTER HAVEN, FL 33884**

Mailing Address
**571 GRAND CAYMAN CIR
 LAKE LAND, FL 33803**



01222006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3749807 Applied For
 Not Applied

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VINCENT, BRYAN G
 571 GRAND CAYMAN CIR
 LAKE LAND, FL 33803**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP VINCENT, BRYAN G 571 GRAND CAYMAN CIR LAKE LAND, FL 33803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WEINBERGER, TED J 1000 CAMPBELL AV LAKE WALES, FL 33853
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DYS ADAMS, LINDA E 571 GRAND CAYMAN CIR LAKE LAND, FL 33803
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/24/06-80041-023 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ *2005*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____