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 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 all other like empowered.				
SIGNATURE: BADILLLO , EDUARDO	PT	04/22/2024		

SIGNATURE: BADILLLO	, EDUARDO

#### DOCUMENT# P21000104368

Entity Name: SANTA BARBARA STEAKHOUSE CORP

### **Current Principal Place of Business:**

EDUARDO BADILLO 6636 MISSION CLUB BLVD #310 ORLANDO, FL 32821

# **Current Mailing Address:**

8600 W IRLO BRONSON MEMORIAL HWY KISSIMMEE, FL 34743 US

# FEI Number: 87-3977812

# Name and Address of Current Registered Agent:

BADILLO, EDUARDO 8600 W IRLO BRONSON MEMORIAL HWY KISSIMMEE, FL 34743 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

#### **Officer/Director Detail :**

Title	PT	Title	V
Name	BADILLLO, EDUARDO	Name	ROQUE, EDWARD
Address	6636 MISSION CLUB BLVD #310	Address	5654 CHIPULA CR
City-State-Zip:	ORLANDO FL 32821	City-State-Zip:	ORLANDO FL 32835

Electronic Signature of Signing Officer/Director Detail

FILED Apr 22, 2024 Secretary of State 7248814044CC

Date

Certificate of Status Desired: No

Date