2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007
Secretary of State

DOCUMENT# 408339

Entity Name: SANTA MARIA RESTAUANT, INC.

Current Principal Place of Business:

135 AVENIDA-MENDENDEZ
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

135 AVENIDA-MENDENDEZ
ST. AUGUSTINE, FL 32084

New Mailing Address:

239 COQUINA AVE.
ST. AUGUSTINE, FL 32080

FEI Number: 59-1415050 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONNELL, CARL W
135 AVENIDA MENENDEZ
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

CONNELL, CARL W
239 COQUINA AVE.
SAINT AUGUSTINE, FL 32080 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: 04/17/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PDS ( ) Delete
Name: CONNELL, CARL W,
Address: 135 AVENIDA MENENDEZ
City-St-Zip: ST AUGUSTINE, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change ( ) Addition
Name: CONNELL, CARL W,
Address: 239 COQUINA AVE.
City-St-Zip: ST. AUGUSTINE, FL 32080

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: CARL W. CONNELL PDS 04/17/2007
Electronic Signature of Signing Officer or Director — Date