## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 24, 2005 08:00 AM Secretary of State

ARRIOAL KLI OKI	Jan 24, 2003 00.00 A
DOCUMENT # 543982  1. Entity Name 7 MILE GRILL, INC.	Secretary of State
Principal Place of Business Mailing Address  1240 OVERSEAS HIGHWAY 1240 OVERSEAS HIGHWAY MARATHON, FL 33050 MARATHON, FL 33050	
•	
DO NOT WRITE IN THIS SPA	O1182005 No Chg-P CR2E034 (10/03)  CE 4, FEI Number Applied For
	59-1767230 Not Applicable  5. Certificate of Status Desired \$8.75 Additional
6. Name and Address of Current Registered Agent	Fee Required
WOLFE, JOHN J 2955 OVERSEAS HWY MARATHON, FL 33050	DO NOT WRITE IN THIS SPACE
<ol> <li>The above named entity submits this statement for the purpose of changing its register the obligations of registered agent.</li> </ol>	ed office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE  Signature typed or printed name of registered agont and filtre it applicable (NOTE, Register)	ad Agent signature required when reinstäting) DATE
	COCCO+0000H
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.	
16. OPFICERS AND DIRECTORS	
NAME NAKLICKI, GLENN H STREET ADDRESS 1240 OVERSEAS HIGHWAY CITY-ST-ZIF MARATHON, FL 33050	
TITLE DV NAME SCOTT, J WILLIAM STREET ADDRESS 1240 OVERSEAS HIGHWAY CITY-ST ZIP MARATHON, FL 33050	
TITE ST  NAME NAKLICKI, JUDITH A  STREET ADDRESS 1240 OVERSEAS HIGHWAY  CITY-ST-ZIP MARATHON, FL 33050	DO NOT WRITE
NAME SCOTT, SHIRLEY A STREET ADDRESS 1240 OVER SEAS HIGHWAY CITY-ST-ZIP MARATHON, FL 33050	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-21P	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Of Signing Phone #	