


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT # A96000002124	
1. Entity Name KOO KOO ROO FLORIDA 107J LTD.	

Principal Place of Business 2701 ALTON PARKWAY IRVING, CA 92606-5149	Mailing Address 2701 ALTON PARKWAY ATTN: TAX DEPT IRVINE, CA 92606
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>
DATE _____

9. Capital Contributions as Shown on record. \$10,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$ 10,000
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L96000001217	STREET ADDRESS	
NAME	R.A.C. 107J L.C.	CITY - ST - ZIP	300055193733
STREET ADDRESS	2701 ALTON PARKWAY		05/24/05--01062--009 **158.75
CITY - ST - ZIP	IRVING, CA 926065149		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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STREET ADDRESS			
CITY - ST - ZIP			

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: 	Anthony G. Bari	4-20-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date
		Daytime Phone #

FILED
 2005 MAY -2 AM 10: 23
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



04052005 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0759149	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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STAPLE CHECK HERE