2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2006
Secretary of State

DOCUMENT# F05000003046

Entity Name: TRI-STATE RESTAURANTS, INC.

Current Principal Place of Business:

701 LEE STREET, SUITE 1000
DES PLAINES, IL 60016

New Principal Place of Business:

Current Mailing Address:

701 LEE STREET, SUITE 1000
DES PLAINES, IL 60016

New Mailing Address:

FEI Number: 36-3963885 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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 Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MUELLER, KURT M
Address: 1009 ASHLAND
City-St-Zip: WILMETTE, IL 60091

Title: STD ( ) Delete
Name: EVANS, BLANE P
Address: 4550 W. 150TH STREET
City-St-Zip: MIDLOTHIAN, IL 60445

Title: V ( ) Delete
Name: LOPATER, LAWRENCE
Address: 18 WHITEWHOOD DRIVE
City-St-Zip: NORTH HILLS, NY 11576

Title: AS ( ) Delete
Name: BORY, JUDITH
Address: 358 CAROL DRIVE
City-St-Zip: MASSAPEQUA PARK, NY 11762

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JUDITH BORY AS 07/13/2006

Electronic Signature of Signing Officer or Director Date