

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 09, 2011
Secretary of State

Entity Name: BL RESTAURANTS GROUP HOLDING CORP.

Current Principal Place of Business:

5200 TOWN CENTER CIRCLE SUITE 600
BOCA RATON, FL 33486

New Principal Place of Business:

1840 PICKWICK AVE SUITE A
GLENVIEW, IL 60026

Current Mailing Address:

5200 TOWN CENTER CIRCLE SUITE 600
BOCA RATON, FL 33486

New Mailing Address:

1840 PICKWICK AVE SUITE A
GLENVIEW, IL 60026

FEI Number: 27-1546457

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

OFFICERS AND DIRECTORS:

Title: DVP
Name: MUELLER, DONALD
Address: 1840 PICKWICK AVE SUITE A
City-St-Zip: GLENVIEW, IL 60026

Title: AS
Name: MUELLER, DONALD
Address: 1840 PICKWICK AVE SUITE A
City-St-Zip: GLENVIEW, IL 60026

Title: DVP
Name: MEZZANOTTE, DAVIDD A
Address: 1840 PICKWICK AVE SUITE A
City-St-Zip: GLENVIEW, IL 60026

Title: AS
Name: MEZZANOTTE, DAVIDD A
Address: 1840 PICKWICK AVE SUITE A
City-St-Zip: GLENVIEW, IL 60026

Title: VPAS
Name: LENTZ, M. KURT
Address: 1840 PICKWICK AVE SUITE A
City-St-Zip: GLENVIEW, IL 60026

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: LAURA LOUIS

POA

04/09/2011

Electronic Signature of Signing Officer or Director

Date