

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004268

FILED
Aug 28, 2009
Secretary of State

Entity Name: THE JOHNNY ROCKETS GROUP, INC.

Current Principal Place of Business:

25550 COMMERCE CENTRE
SUITE 200
LAKE FOREST, CA 92630

New Principal Place of Business:

Current Mailing Address:

25550 COMMERCE CENTRE
SUITE 200
LAKE FOREST, CA 92630

New Mailing Address:

FEI Number: 95-4549800 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: CEOP () Delete
Name: SANDERS, LEE
Address: 25550 COMMERCE CENTRE DR STE 200
City-St-Zip: LAKE FOREST, CA 926308893

Title: CFO () Delete
Name: FULLER, JOHN
Address: 25550 COMMERCE CENTRE DR STE 200
City-St-Zip: LAKE FOREST, CA 926308893

Title: S () Delete
Name: ATWOOD, RENEE
Address: 25550 COMMERCE CENTRE DR
City-St-Zip: LAKE FOREST, CA 926308893

Title: D () Delete
Name: SNYDER, DANIEL
Address: 21300 REDSKIN PARK DR
City-St-Zip: ASHBURN, VA 20147

Title: D () Delete
Name: SCHAR, DWIGHT
Address: 11700 PLAZA AMERICA DR STE 500
City-St-Zip: RESTON, VA 20190

Title: D () Delete
Name: AINLEY, CHRIS
Address: 1800 TYSONS BLVD STE 550
City-St-Zip: MC LEAN, VA 22102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: ALAN, HINSON
Address: 25550 COMMERCE CENTRE DR
City-St-Zip: LAKE FOREST, CA 926308893

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 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: ALAN HINSON

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08/28/2009

Electronic Signature of Signing Officer or Director

Date