

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006148

FILED
Mar 30, 2005
Secretary of State

Entity Name: SAM SELTZER'S STEAK HOUSES OF AMERICA, INC.

Current Principal Place of Business:

4744 N. DALE MABRY
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

4744 N. DALE MABRY
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-3391125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLIDAY, RONALD ESQ
PIPER RUDNICK, LLP
101 E KENNEDY, #2000
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SELTZER, MICHAEL
Address: 10101 COLLINS AVE PH 1F
City-St-Zip: BAL HARBOR, FL 331541648

Title: D () Delete
Name: SELTZER, HAROLD
Address: 4806 CULBREATH ISLES WAY
City-St-Zip: TAMPA, FL 33629

Title: T () Delete
Name: DUBROVSKY, FRED
Address: 17 BELSIZE
City-St-Zip: HAMPSTEAD, QUEBEC CANADA,

Title: DAS (X) Delete
Name: BLOOM, HYMAN
Address: 3495 AVE. DU MUSEE, APT. 102
City-St-Zip: MONTREAL, QUEBEC CANADA,

Title: DS (X) Delete
Name: DUBROVSKY, RICHARD
Address: 4770 KENT AVE STE 214
City-St-Zip: MONTREAL, QUEBEC,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: SELTZER, MICHAEL
Address: 10101 COLLINS AVE PH 1F
City-St-Zip: BAL HARBOR, FL 331541648

Title: VPAS (X) Change () Addition
Name: BLOOM, HYMAN
Address: 4744 NORTH DALE MABRY HWY
City-St-Zip: TAMPA, FL 33614

Title: S (X) Change () Addition
Name: DUBROVSKY, RICHARD
Address: 4744 NORTH DALE MABRY HWY
City-St-Zip: TAMPA, FL 33614

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 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 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: MICHAEL SELTZER

P

03/30/2005

Electronic Signature of Signing Officer or Director

Date