

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001313

FILED
Jan 11, 2008
Secretary of State

Entity Name: TACO BELL OF AMERICA, INC.

Current Principal Place of Business:

17901 VAN KARMAN
IRVINE, CA 92614 US

New Principal Place of Business:

Current Mailing Address:

17901 VAN KARMAN
IRVINE, CA 92614 US

New Mailing Address:

FEI Number: 33-0777005 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LORA, MELISSA
Address: 17901 VON KARMAN
City-St-Zip: IRVINE, CA 926146221

Title: VPS () Delete
Name: EMMONS, STEVEN L
Address: 17901 VON KARMAN
City-St-Zip: IRVINE, CA 926146221

Title: DASV () Delete
Name: ARMBRUSTER, CHRIS
Address: 17901 VON KARMAN
City-St-Zip: IRVINE, CA 926146221

Title: CFO () Delete
Name: LLOYD, LARRY
Address: 17901 VON KARMAN
City-St-Zip: IRVINE, CA 926146221

Title: AS () Delete
Name: STEARMAN, JEFF
Address: 1900 COLONEL SANDERS LANE
City-St-Zip: LOUISVILLE, KY 40213

Title: AS () Delete
Name: GERICH, LAURENCE
Address: 17901 VON KARMAN
City-St-Zip: IRVINE, CA 92614

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
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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: LAURENCE GERICH

AS

01/11/2008

Electronic Signature of Signing Officer or Director

_____ Date