2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 24, 2005 08:00 AM DOCUMENT # G89202 1. Entity Name **Secretary of State** BIG CHEESE RESTAURANT, INC. Principal Place of Business Mailing Address 8080 SW 67TH AVE MIAMI FL 33143 8080 SW 67TH AVE MIAMI FL 33143 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-2383464 Not Applicable Zip Country Ζp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HKE&F REGISTERED AGENT CORP. Street Address (P.O. Box Number is Not Acceptable) 2601 S. BAYSHORE DR., STE. 600 **MIAMI FL 33133** City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and tife if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution, Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Defete ☐ Change Addition ARCHER, WILLIAM, JR. NAME U00000195460 8080 SW 67TH AVE STREET ADORESS STREET ADDRESS 01/26/05-80029-006 150.00 MIAMI FL City-Sp. 7P CHY-ST-ZIP Change STD Addition ☐ Delete TITLE THEF DUELL, GARRY, JR. NAME NAME STREET ADDRESS 8080 SW 67TH AVE JIRLET ADDRESS MIAMI FL CHY-ST-ZIP CITY-ST-70P Addition Delete ☐ Change THE NAME STREET AUDILESS STREET ADDRESS CITY ST-ZIP 011Y-51-7/P TITLE ☐ Delete THE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP City-St-ZiP Delete Change ☐ Addition DILLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-71P Delete IIILE Change ☐ Addition THUE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI- AP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

E OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

1-20-05

FILED