2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J21434

FILED Apr 16, 2009 Secretary of State

Entity Name: ST. JOHNS SEAFOOD & STEAKS, INC.

Current Principal Place of Business: New Principal Place of Business: 7546 BEACH BLVD. JACKSONVILLE, FL 32216 **Current Mailing Address: New Mailing Address:** PO BOX 550860 JACKSONVILLE, FL 32255 US FEI Number: 59-2690986 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AKEL, DANIEL D. 1 INDÉPENDENT DR. **SUITE 2301** JACKSONVILLE, FL 32202 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition RUKAB, ROBERT RUKAB, ROBERT Name: Name: 8326 RIDING CLUB ROAD 8326 RIDING CLUB ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256 Title: VΡ Title: () Change () Addition () Delete Name: RUKAB, LORI Name: 12465 IVEY WOODS CT Address: Address: JACKSONVILLE, FL 32258 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition FARAH, MUNA Name: Name: 9379 JAYBIRD CIR. E Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: () Delete Title: () Change () Addition FARAH, GREG Name: Name: Address: 9379 JAYBIRD CIR. E Address: City-St-Zip: JACKSONVILLE, FL 32257 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: ROBERT RUKAB PRES 04/16/2009