## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J50159

YIAPIS, JANENE S.

ENGLEWOOD, FL

2828 MCCALL RD STE 1 AND 2

Name:

Address: City-St-Zip:

Entity Name: TIFFANY FAMILY RESTAURANT, INC.

FILED Mar 10, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2828 S. MCCALL ROAD #1&#2 2828 S. MCCALL ROAD #11 ENGLEWOOD, FL 34224 ENGLEWOOD, FL 34224 **Current Mailing Address: New Mailing Address:** 170 W DEARBORN ST ENGLEWOOD, FL 34223 US FEI Number: 59-2761258 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: DUNKIN, DAVID A 170 W DEARBORN ENGLEWOOD, FL 34223 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 () Change () Addition YIAPIS, GEORGE Name: Name: 10307 WILMINGTON BLVD. Address: Address: City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: Title: DV Title: () Delete () Change () Addition Name: YIAPIS, DEAN Name: 2828 MCCALL RD STE 1 AND 2 Address: Address: ENGLEWOOD, FL City-St-Zip: City-St-Zip: Title: DST Title: () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DEAN YIAPIS DV 03/10/2009