

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000055839

FILED
Mar 01, 2005
Secretary of State

Entity Name: GOODMAX RESTAURANT GROUP, LLC

Current Principal Place of Business:

1400 E HILLSBORO BLVD
SUITE 200E
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

1400 E HILLSBORO BLVD
SUITE 200E
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 20-0652913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARGO, MICHAEL E
BLACKSTONE BLDG, 3RD FLOOR
707 SE 3RD AVE
FORT LAUDERDALE, FL 33316 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MCBRIDE, JOHN
Address: 1400 E HILLSBORO BLVD, STE 200E
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCBRIDE, JOHN R
Address: 1400 E HILLSBORO BLVD, STE 200E
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGRM () Change (X) Addition
Name: FUNG, JAY Y
Address: 1400 E. HILLSBORO BLVD., SUITE 200E
City-St-Zip: DEERFIELD BEACH, FL 33441

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN R. MCBRIDE

MGRM

03/01/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date