2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000078185

Entity Name: HAMBURGER MARY'S TAMPA, LLC

POLSTON-OLIVER, STEFAN

CHICAGO, IL 60613

3600 N LAKESHORE DR., UNIT 1808

Name:

Address:

City-St-Zip:

FILED May 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1120 E KENNEDY BLVD 1120 E KENNEDY BLVD #1416 #620 TAMPA, FL 33602 TAMPA, FL 33602 **Current Mailing Address: New Mailing Address:** P. O. BOX 18172 TAMPA, FL 33679 US FEI Number: 26-3105183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AMERICAN SAFETY COUNCIL, INC. 5125 ADANSON ST. SUITE 500 ORLANDO, FL 32804 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete KING, KURT Name: Name: Address: 1014 EMERALD CREEK DR Address: City-St-Zip: VALRICO, FL 33596 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: HIGGINS, MICHAEL Name: HIGGINS, MICHAEL Address: 1120 E KENNEDY BLVD #1416 Address: 1120 E KENNEDY BLVD #620 City-St-Zip: TAMPA, FL 33602 US City-St-Zip: TAMPA, FL 33602 US Title: MGRM () Delete Title: () 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL HIGGINS MGRM 05/29/2009