

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L37693

FILED
Apr 18, 2007
Secretary of State

Entity Name: ISLAND RESTAURANTS, INC.

Current Principal Place of Business:

2710 N ROOSEVELT BLVD
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

750 NE 7TH AVENUE
DANIA BEACH, FL 33004 US

New Mailing Address:

FEI Number: 59-2990259

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD INC
201 ALHAMBRA CIR
STE 1102
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: LEWIS, THOMAS E.,
Address: 750 NE 7TH AVENUE
City-St-Zip: DANIA BEACH, FL 33004

Title: P () Delete
Name: SPOTTSWOOD, WILLIAM
Address: 500 FLEMING ST
City-St-Zip: KEY WEST, FL 33040

Title: VP () Delete
Name: JARRETT, SANDRA
Address: 576 S. ORLEANS
City-St-Zip: TAMPA, FL 33606

Title: S (X) Delete
Name: JETER, JERRY D
Address: 1545 EUCERD NE, # 2H
City-St-Zip: MIAMI BEACH, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: JARRETT, SANDRA
Address: 576 S. ORLEANS
City-St-Zip: TAMPA, FL 33606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS E LEWIS

VP

04/18/2007

Electronic Signature of Signing Officer or Director

Date