2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004964

GLASSIE, DONELSON C

CHRISTIES LANDING

NEWPORT, RI 02840

Name: Address:

City-St-Zip:

Entity Name: ATLANTIC STAR RESTAURANTS, LLC

FILED Apr 14, 2006 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|--|------------|-------------------------------|---|---------------------------------------|
| C/O YANKEE D CHRISTIES LA NEWPORT, RI | NDING | NT CORP. | | |
| Current Mailing Address: | | | New Mailing Address: | |
| C/O YANKEE D CHRISTIES LA NEWPORT, RI | NDING | NT CORP. | | |
| FEI Number: 13-40 | 096300 F | El 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: | |
| MAJESTIC HO 9400 S. DADEL MIAMI, FL 3315 | AND BLVD., | PH#5 | | |
| The above nam in the State of F | | mits this statement for the p | urpose of changing its registere | d office or registered agent, or both |
| SIGNATURE: | | | | |
| _ | Electronic | Signature of Registered Age | nt | Date |
| MANAGING MEMBERS/MANAGERS: | | | ADDITIONS/CHANGES: | |
| Title: MG | R ()De | lete | 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 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: DONELSON C. GLASSIE MGR 04/14/2006