

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # M96000000351

1. Entity Name
PRIME STEAK-JACKSONVILLE, L.L.C.



Principal Place of Business
1201 RIVER PLACE BLVD
JACKSONVILLE, FL 32207

Mailing Address
PO BOX 65078
BATON ROUGE, LA 70896-5078



DO NOT WRITE IN THIS SPACE

04262005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
72-1332607

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
MORAN, THOMAS J
2354 S. ACADIAN THRUWAY, SUITE A
BATON ROUGE, LA

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
HARRIS, STAN
2354 S. ACADIAN THRUWAY, SUITE A
BATON ROUGE, LA

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
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NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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04/27/05-80115-018 55.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/26/05

Date

(225)389-9990

Daytime Phone #