2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2004
Secretary of State

DOCUMENT# N94000005650

Entity Name: PALM BEACH RESTAURANT ASSOCIATES, INC.

Current Principal Place of Business:

505 S. FLAGLER DR.
STE. 900
W. PALM BCH., FL 33401

New Principal Place of Business:

Current Mailing Address:

505 S. FLAGLER DR.
STE. 900
W. PALM BCH., FL 33401

New Mailing Address:

FEI Number: 65-0536571 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, LOUIS M
505 S. FLAGLER DR.
STE. 900
W. PALM BCH., FL 33401 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

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GOLDNER, NORBERT
Address: 331 S. COUNTY RD.
City-St-Zip: PALM BEACH, FL 33480

Title: DVST ( ) Delete
Name: GMINELLA, MAURIZIO
Address: 288 SOUTH COUNTY RD
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete
Name: LEVERRIER, JEAN P
Address: 132 N COUNTY RD
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUIS COHEN TREA 06/16/2004

Electronic Signature of Signing Officer or Director — Date