

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028431

FILED
Feb 15, 2005
Secretary of State

Entity Name: ST. JOHNS RESTAURANT MANAGEMENT COMPANY

Current Principal Place of Business:

2120 UNIVERSITY BLVD. W.
JACKSONVILLE, FL 32217

New Principal Place of Business:

6550 ST. AUGUSTINE ROAD
303
JACKSONVILLE, FL 32217

Current Mailing Address:

2120 UNIVERSITY BLVD. W.
JACKSONVILLE, FL 32217

New Mailing Address:

6550 ST. AUGUSTINE ROAD
303
JACKSONVILLE, FL 32217

FEI Number: 59-3653507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKEL, DANIEL D
ONE INDEPENDENT DR., SUITE 2301
JACKSONVILLE, FL 32202 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: D () Delete
Name: RUKAB, ROBERT
Address: 2443 SARAGOSSA AVE.
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: RUKAB-GRASSI, LORI
Address: 9434 GENNA TRACE
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: FARAH, GREG
Address: 12081 BRANDON LAKE DR.
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: FARAH, MUNA
Address: 12081 BRANDON LAKE DR.
City-St-Zip: JACKSONVILLE, FL 32257

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT RUKAB

D

02/15/2005

Electronic Signature of Signing Officer or Director

Date