

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093301

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** RESTAURANT MANAGEMENT SOLUTIONS, INC.

**Current Principal Place of Business:**

829 N. PALMETTO AVENUE  
GREEN COVE SPRINGS, FL 32043

**New Principal Place of Business:**

**Current Mailing Address:**

829 N. PALMETTO AVENUE  
GREEN COVE SPRINGS, FL 32043

**New Mailing Address:**

**FEI Number:** 59-3745407

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAJALIA, MICHAEL V  
829 N. PALMETTO AVENUE  
GREEN COVE SPRINGS, FL 32043 US

**Name and Address of New Registered Agent:**

STONEBURNER, GRESHAM R  
841 PRUDENTIAL DRIVE  
SUITE 1400  
JACKSONVILLE, FL 32207 US

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:** GRESHAM R. STONEBURNER

04/27/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DP ( ) Delete  
**Name:** BAJALIA, MICHAEL V  
**Address:** 3624 KAPALUA CT  
**City-St-Zip:** GREEN COVE SPRINGS, FL 32043

**Title:** DST ( ) Delete  
**Name:** BAJALIA, MARTINA  
**Address:** 3624 KAPALUA CT  
**City-St-Zip:** GREEN COVE SPRINGS, FL 32043

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**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 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:** MICHAEL V. BAJALIA

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

Date