

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 25, 2007 8:00 am
Secretary of State

06-25-2007 90004 026 ***158.75

DOCUMENT # P01000111793

1. Entity Name
RESTAURANT CORPORATION OF AMERICA, INC.



Principal Place of Business Mailing Address
1575 N.W. 14TH STREET 1575 N.W. 14TH STREET
MIAMI, FL 33125 MIAMI, FL 33125

40121669



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

06082007 Chg-P CR2E034 (12/06)

City & State City & State

4. FEI Number Applied For
65-1008871 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AABA, AARON
1575 N.W. 14TH STREET
MIAMI, FL 33125

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when consisting)

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	AABA, AARON	
STREET ADDRESS	1575 N.W. 14TH STREET	
CITY- ST- ZIP	MIAMI, FL 33125	
TITLE	V P	<input type="checkbox"/> Delete
NAME	CHAYKIN, CRAIG A V P	
STREET ADDRESS	1575 N.W. 14 STREET	
CITY- ST- ZIP	MIAMI, FL 33125	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARON AABA 6-12-07 321-7777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
40121669
#PO100011793

May 30, 2007

Florida Department of State
Division of Corporations
2661 Executive Center Circle
Clifton Building
Tallahassee, Florida 32301

To Whom It May Concern:

I spoke to your office today to explain what happened to the check I mailed on April 2nd in the amount of \$158.75 to renew my corporation annual report for 2007. Your office advised me to put it in writing and that the late fee will be waived.

I received the envelope back from the U.S. Post Office with a note saying that they were sorry but their equipment had destroyed my mail. Enclosed please find another check in the amount of \$158.75 to pay for the corporation annual report for 2007. Thank you in advance for your assistance.

Sincerely,



Aaron Aaba