P02,000005/42

TO: Amendment Section Division of Corporations

CR2E045(07/02)

			0008387 10/16/02	01009003
SUBJECT: A	AB Restaurant Group (Name of corpor	Inc.	*******70.00	*****35.00
DOCUMENT NUMBER		······································		
			itted for filing	٠
	Change of Registered Office/A		med for ming.	
Please return all correspon	dence concerning this matter to	the following:		
William Ba	ird			
(Nar	ne of person)			٠
New York F	Lizza Department			: :
	f firm/company)			τ
1428 N.E.	4th Avenue			
	(Address)	-	·	 -
Fort Laude	erdale, FL 33304			
(City/sta	te and zip code)			
` •	ncerning this matter, please cal	1:		
1 of further information co.	mooning and mactor, product our	••		
William Baird	at (954	523-0888 ode & daytime telephone		-
(Name of pe	erson) (Area co	ode & daytime telephone	number)	OIVI S
Enclosed is a \$35.00 check	k made payable to the Departme	ent of State.	,	SION SION
			-	
Mailing Address:	Street Address:		•	FILED SECRETARY OF STATE IVISION OF CORPORATION
Amendment Section Division of Corporations	Amendment Section Division of Corpora	ı tions	:	STA ORA
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	409 E. Gaines Street Tallahassee, FL 323	t		: (C
1 ananassee, 1 L 52514	1 4444445555, 1 15 552	,,,,	,	- &
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions	of sections 607.0502	2, 617.0502, 607.15	08, or 617.1508,	Florida Statutes,
this statement of change is Florida in o	submitted for a corpor rder to change its reg	_	•	
of Florida.	and the diministration is easily	1310, 011 0,7,100 0, 702	iotorea ageni, or	
1. The name of the corpora	tion: AAB Resta	aurant Group,	Inc.	30 ZOC T
2. The principal office addr	ess: 1428 N.E	. 4th Avenue		55
	Fort Laud	derdale, FL	33304	PH PH
3. The mailing address (if o	lifferent):		· · · · · · · · · · · · · · · · · · ·	ų: 1 0
4. Date of incorporation/qu	alification: 1/10/(02 Docu	ment number: P0	
5. The name and street addi Florida Department of St		istered agent and reg	istered office on t	ile with the
Al	ton John Baird	ā, Jr.		
40	20 Palm Aire I	Orive West #1	06	
Po	ompano Beach, I	FL 33069	1	_
6. The name and street ad changed):			nged) and /or reg	gistered office (if
	lliam George E			_
14	28 N.E. 4th Av			
		l mailbox NOT acceptable)		
F'C	rt Lauderdale,	, FL 33304		<u> </u>
The street address of its reagent, as changed will be in	dentical.			•
Such change was authorize authorized by the board, or	d by resolution duly a the corporation has b	adopted by its board been notified in writ	of directors or bing of the change	y an officer so
Signature of an officer, chairman or vice	Ac Tawa	William Ge	orge Baird, ortyped name and title)	President
I hereby accept the appoin I further agree to comply verformance of my duties, registered agent. Or, if thi office address, I hereby con	tment as registered as vith the provisions of a and I am familiar wit	gent and agree to ac all statutes relative h and accept the ob	ct in this capacity to the proper and	i l complete sition as
William Georg	10 Bairel	October		<u>. </u>
(Signature of Regis If signing on behalf of an entity:			(Date)	
William Georg		Preside	n+	
(Typed or Printed)			(Capacity)	· · · · · · · · · · · · · · · · · · ·

* * * FILING FEE: \$35.00 * * *