2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000027608

1. Entity Name
THIRD STREET DINER, INC.



FILED Apr 30, 2007 08:00 Al Secretary of State

Applied For

Principal Place of Business

223 S 9TH AVENUE JACKSONVILLE BEACH, FL 32250 Mailing Address

2275 ATLANTIC BLVD. NEPTUNE BEACH, FL 32266



DO NOT WRITE IN THIS SPACE

04262007 No Chg-P CR2E034 (11/05)

02-0568057 Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

SORRELL, MARY C ESQ. 2275 ATLANTIC BLVD. SUITE 200 DO NOT WRITE IN THIS SPACE

4. FEI Number

| SUITE 200 NEPTUNE BEACH, FL 32266 | | | IN THIS SPACE | | | |
|--|---|--|-------------------|--------------------------------|---|------------------------|
| | named entity submits this statement for the pons of registered agent. | urpose of changing its registere | d office or re | gistered agent, or both, | in the State of Florida. I am farr | iliar with, and accept |
| SIGNATURE_ | Signature, typed or printed name of registered agent and title in | applicable. (NOTE: Registered | I Agent signature | required when reinstating) | DATE | |
| | E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00 | 9. Election Campaign Finan Trust Fund Contribution. | cing | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIREC | CTORS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD KOUTROUMANOS, GEORGE 2275 ATLANTIC BLVD. NEPTUNE BEACH, FL 32266 | | | · ** | ¹ 0000007450 05/16/07 - 8001 | 174 5 014 150 00 |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | VSP KOUTROUMANOS, NICHOLAS 2275 ATLANTIC BLVD. NEPTUNE BEACH, FL 32266 | | : | | 00/10/01-0001 | |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | | | | DO I | NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | IN T | HIS SPACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | ae Y | · · |
| TITLE NAME STREET ADDRESS STY-ST-ZIP | | | ÷ | ' | | 3 ' |

. 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 trysted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if thanged, or on an attachment with an address, with all other like empowered.

'ATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-07

904-220-0080