

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000064609

FILED
Apr 27, 2005
Secretary of State

Entity Name: SARASOTA RESTAURANT SOLUTIONS, INC.

Current Principal Place of Business:

1605 MAIN STREET
SUITE 1001
SARASOTA, FL 34236

New Principal Place of Business:

7376 EAST 52ND PLACE
BRADENTON, FL 34201

Current Mailing Address:

1605 MAIN STREET
SUITE 1001
SARASOTA, FL 34236

New Mailing Address:

P.O. BOX 20417
BRADENTON, FL 34201

FEI Number: 01-0717365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDSMITH, STANLEY A
1605 MAIN STREET
SUITE 1001
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

HARRIS, JUDITH D
7204 ST. GEORGES WAY
UNIVERSITY PARK, FL 34201 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: JUDITH D. HARRIS

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVPS () Delete
Name: HARRIS, BART J
Address: 1605 MAIN STREET #1001
City-St-Zip: SARASOTA, FL 34236

Title: DPAS () Delete
Name: HARRIS, JUDITH D
Address: 1605 MAIN STREET #1001
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVPS (X) Change () Addition
Name: HARRIS, BART J
Address: 7204 ST. GEORGES WAY
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: DPAS (X) Change () Addition
Name: HARRIS, JUDITH D
Address: 7204 ST. GEORGES WAY
City-St-Zip: UNIVERSITY PARK, FL 34201

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: JUDITH D. HARRIS

DPAS

04/27/2005

Electronic Signature of Signing Officer or Director

Date