## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000070192

Entity Name: JACKIE ONE RESTAURANT, INC.

FILED Jun 26, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	•		New Fillicipal Flace	oi busilless.	
	LANTIC AVEN BEACH, FL 33				
Current M	lailing Addre	ss:	New Mailing Address	::	
	LANTIC AVEN BEACH, FL 33				
FEI Number	: 81-0559817	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
	E, ARIEL LANTIC AVE BEACH, FL 33	3444 US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Ager			ent	Date	
		93(2)(b), F.S., the corporation did n ng Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LOUIMERE, S	EHAVEN DR #3	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	LOUIMERE, SI	EHAVEN DR #3	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ANASTASE, A	EHAVEN DR #3	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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: ANIEL ANASTASE VP 06/26/2009