2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000100093

Entity Name: "I DON'T CARE" BAR & GRILL, INC.

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4556 S MANHATTAN AVE 4556 S MANHATTAN AVE

TAMPA, FL 33616 TAMPA, FL 33611

Current Mailing Address: New Mailing Address:

4556 S MANHATTAN AVE 4556 S MANHATTAN AVE

TAMPA, FL 33616 TAMPA, FL 33611

FEI Number: 54-2073842 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:

BARKER, PAMELA G
4556 S. MANHATTAN AVE
E

BARKER, PAMELA G
4556 S. MANHATTAN AVE
E

TAMPA, FL 33616 US TAMPA, FL 33611 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: 04/26/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST () Delete Title: DST (X) Change () Addition

Name:BENNETT, CONNIE AName:BENNETT, CONNIE AAddress:3207 W BALLAST POINT BLVDAddress:4556 S. MANHATTAN AVE., STE. E

City-St-Zip: TAMPA, FL 33611 City-St-Zip: TAMPA, FL 33611

only-dezip. Talvina, i.e. 33011 Sity-dezip. Talvina, i.e. 330

Title: DP () Delete Title: DP (X) Change () Addition Name: BENNETT. CONNIE BENNETT. CONNIE

Address: 4556 S MANHATTAN AVE E Address: 4556 S MANHATTAN AVE E

City-St-Zip: TAMPA, FL 33616 City-St-Zip: TAMPA, FL 33611

Title: DST () Delete Title: DST (X) Change () Addition

 Name:
 BENNETT, CONNIE
 Name:
 BENNETT, CONNIE

 Address:
 4556 S MANHATTAN AVE
 Address:
 4556 S MANHATTAN AVE

 City-St-Zip:
 TAMPA, FL 33616
 City-St-Zip:
 TAMPA, FL 33611

I hereby certify that the information supplied with this filing does not qualify for the 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: CONNIE A. BENNETT DST 04/26/2006