2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2004
Secretary of State

DOCUMENT# P03000014738

Entity Name: RIB CITY HILLSBOROUGH, INC.

Current Principal Place of Business:

12575 S CLEVELAND AVE
FT MYERS, FL 33907

New Principal Place of Business:

8710 HILLSBOROUGH AVE
UNIT 203
TAMPA, FL 33615 US

Current Mailing Address:

12575 S CLEVELAND AVE
FT MYERS, FL 33907

New Mailing Address:

12595 S CLEVELAND AVE
SUITE 110
FT MYERS, FL 33907

FEI Number: 57-1153422 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREEN, BRUCE D
1520 ROYAL PALM SQUARE BLVD STE 352
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Change (X) Addition
Name: PEDEN, PAUL D PD
Address: 12995 S CLEVELAND AVE STE 110
City-St-Zip: FT. MYERS, FL 33907 US

Title: STD ( ) Change (X) Addition
Name: PEDEN, CRAIG D STD
Address: 12995 S CLEVELAND AVE STE 110
City-St-Zip: FT. MYERS, FL 33907 US

Title: V ( ) Change (X) Addition
Name: COOK, PETER M V
Address: 12995 S CLEVELAND AVE
City-St-Zip: FT. MYERS, FL 33907 US

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: PAUL D PEDEN PD 01/08/2004

Electronic Signature of Signing Officer or Director — Date