2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021053

Entity Name: MHR STEAKHOUSE OF BRADENTON, INC.

FILED Apr 27, 2007 Secretary of State

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

4744 N. DALE MABRY HWY. TAMPA, FL 33614

Current Mailing Address: New Mailing Address:

4744 N. DALE MABRY HWY. TAMPA, FL 33614

FEI Number: 20-0103626 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:

MCINTOSH, ANDREW L HOLLIDAY, RONALD ESQ 101 E. KENNEDY BLVD., SUITE 2000 PIPER RUDNICK LLP TAMPA, FL 33602 101 E KENNDEDY BLVD, SUITE 2000

TAMPA, FL 33602 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: RONALD HOLLIDAY 04/27/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: (X) Change () Addition SELTZER, MICHAEL Name: SELTZER, MICHAEL Name: 4744 N. DALE MABRY HWY. 4744 N. DALE MABRY HWY. Address: Address:

City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33614

() Delete **VPAS** Title: DVP Title: (X) Change () Addition Name: BLOOM, HYMAN Name: BLOOM, HYMAN

4744 NORTH DALE MABRY HWY 4770 KENT AVE SUITE 100 Address: Address:

TAMPA, FL 33614 MONTREAL, QC H3W 1H2 CA City-St-Zip: City-St-Zip:

() Delete (X) Change () Addition DUBROVSKY, RICHARD DUBROVSKY, RICHARD Name: Name: 4744 NORTH DALE MABRY HWY 4770 KENT AVE SUITE 214 Address: Address:

Title:

DS

City-St-Zip: TAMPA, FL 33614 City-St-Zip: MONTREAL, QC H3W 1H2 CA

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

COX, KEN Name: Name: Address: Address: 4744 N DALE MABRY City-St-Zip: City-St-Zip: TAMPA, FL 33614

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: KEN COX AS 04/27/2007