## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P03000021053

Entity Name: MHR STEAKHOUSE OF BRADENTON, INC.

FILED Jul 14, 2008 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:

HOLLIDAY, RONALD ESQ
PIPER RUDNICK LLP
101 E KENNDEDY BLVD, SUITE 2000
TAMPA, FL 33602 US

KAHELIN, SALLY
4744 N DALE MABRY HWY
TAMPA, FL 33614 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: SALLY KAHELIN 07/14/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:SELTZER, MICHAELName:MOUNTFORD, JOHNAddress:4744 N. DALE MABRY HWY.Address:4744 N. DALE MABRY HWY.

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

 Name:
 BLOOM, HYMAN
 Name:
 KAHELIN, SALLY

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

Address: 4770 KENT AVE SUITE 100 Address: 4744 N DALE MABRY HWY
City-St-Zip: MONTREAL, QC H3W 1H2 CA City-St-Zip: TAMPA, FL 33614 US

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

Name: MCGRATH, ALEXANDER S Name:
Address: 200 STATE STREET Address:

City-St-Zip: BOSTON, MA 02109 US City-St-Zip:

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

 Name:
 KAHELIN, SALLY
 Name:

 Address:
 4744 N DALE MABRY
 Address:

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

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

 Name:
 MOUNTFORD, JOHN
 Name:

 Address:
 4744 N DALE MABRY
 Address:

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

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: SALLY KAHELIN S 07/14/2008