## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000023780

City-St-Zip:

CORAL SPRINGS, FL 33076

FILED Jan 13, 2006 Secretary of State

Entity Nar	me: CPR RE	STAURANTS INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1029 NW 31ST AVENUE POMPANO BEACH, FL 33069			1029 NW 31ST AVE POMPANO BEACH, F	1029 NW 31ST AVE POMPANO BEACH, FL 33069	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	31ST AVENU D BEACH, FL				
FEI Number:	: 01-0769907	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
	ROBERT 151S6 STREE PRINGS, FL :		MATTIS, ROBERT 12395 NW 51ST STR CORAL SPRINGS, FL		
	named entity e of Florida	submits this statement for th	ne purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: ROBER	T MATTIS		01/13/2006	
	Electro	onic Signature of Registered .	Agent	Date	
Election Car	npaign Financii	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD ( MATTIS, CLEI 7666 NW 116 PARKLAND, F	TH LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MATTIS, ROB 12395 NW 51		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SD ( TARABOULOS 4769 NW 120		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: ROBERT MATTIS VD 01/13/2006