2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# P03000067638

Entity Name: AFC RESTAURANT GROUP, INC.

Current Principal Place of Business:

12833 MAGNOLIA POINTE BLVD
CLERMONT, FL 34711

New Principal Place of Business:

2600 E. COLONIAL DRIVE
ORLANDO, FL 32803

Current Mailing Address:

12833 MAGNOLIA POINTE BLVD
CLERMONT, FL 34711

New Mailing Address:

2600 E. COLONIAL DRIVE
ORLANDO, FL 32803

FEI Number: 20-0441043 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KARIMIPOUR, FARHAD
535 DARTMOUTH ST
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

KARIMIPOUR, FARHAD
2600 E. COLONIAL DRIVE
ORLANDO, FL 32803 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: KARIMIPOUR 03/23/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete
Name: KARIMIPOUR, FARHAD
Address: 12833 MAGNOLIA POINTE BLVD.
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete
Name: KARIMIPOUR, FARHAD
Address: 12833 MAGNOLIA POINTE BLVD.
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition
Name: KARIMIPOUR, FARHAD
Address: 2600 E. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32803

Title: D (X) Change ( ) Addition
Name: KARIMIPOUR, FARHAD
Address: 2600 E. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32803

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: KARIMIPOUR PRES 03/23/2009
Electronic Signature of Signing Officer or Director Date