

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013254

FILED
Jan 14, 2009
Secretary of State

Entity Name: MIRAGE RESTAURANT CORP.

Current Principal Place of Business:

4460 N FEDERAL HWY
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

C/O ALLIED MANAGEMENT LTD
232 WEST 48TH STREET STE 4
NEW YORK, NY 10036

New Mailing Address:

FEI Number: 51-0496479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPOTE, BEATRIZ M
799 BRICKELL PLAZA SUITE 700
MIAMI, FL 33131 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: P () Delete
Name: FITZPATRICK, PETER D
Address: 232 WEST 48TH STREET, SUITE 4
City-St-Zip: NEW YORK, NY 10036

Title: V () Delete
Name: DWYER, THOMAS F
Address: 232 WEST 48TH STREET, SUITE 4
City-St-Zip: NEW YORK, NY 10036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: BRENDA MCGRATH

ADMI

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date