

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000156561

FILED
Aug 10, 2005
Secretary of State

Entity Name: OUTDOOR KITCHEN CONCEPTS, INC.

Current Principal Place of Business:

3810 CROSSROADS PARKWAY
FORT PIERCE, FL 34945

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 880217
PORT ST. LUCIE, FL 34988 US

New Mailing Address:

FEI Number: 20-1899668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTER, DEANNA D
10116 CROSBY PLACE
PORT ST. LUCIE, FL 34986 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REGISTER, DEANNA D
Address: 10116 CROSBY PLACE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: VP () Delete
Name: REGISTER, JEFFREY P
Address: 10116 CROSBY PLACE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SECR () Change (X) Addition
Name: REGISTER, ELIZABETH S
Address: 10116 CROSBY PLACE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: TREA () Change (X) Addition
Name: REGISTER, PHILLIP W
Address: 10116 CROSBY PLACE
City-St-Zip: PORT ST. LUCIE, FL 34986

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEANNA REGISTER

PRES

08/10/2005

Electronic Signature of Signing Officer or Director

Date