2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000163768

KIROUAC, LINDA M

JUPITER, FL 33478 US

16919 95TH AVENUE NORTH

Name:

Address:

City-St-Zip:

Entity Name: PBG RESTAURANT GROUP, INC.

FILED Sep 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3902 BURNS ROAD SUITE 20 AND 21 PALM BEACH GARDENS, FL 33410 **New Mailing Address: Current Mailing Address:** 9906 SE OSPREY POINTE DRIVE HOBE SOUND, FL 33455 FEI Number: 74-3135506 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: INDICTOR, STEPHEN D 9906 SE OSPREY POINTE DRIVE HOBE SOUND, FL 33455 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CHMN () Delete () Change () Addition INDICTOR, STEPHEN D Name: Name: 9906 SE OSPREY POINTE DRIVE Address: Address: City-St-Zip: HOBE SOUND, FL 33455 US City-St-Zip: Title: **PRES** Title: () Delete () Change () Addition Name: INDICTOR, AILEEN J Name: 9906 SE OSPREY POINTE DRIVE Address: Address: HOBE SOUND, FL 33455 US City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition KIROUAC, GILBERT D Name: Name: 16919 95TH AVENUE NORTH Address: Address: City-St-Zip: JUPITER, FL 33478 US City-St-Zip: Title: TREA (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEPHEN D. INDICTOR CHMN 09/07/2005