

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000047001

FILED
Dec 05, 2006
Secretary of State

Entity Name: SECOND AVENUE LAS OLAS RESTAURANT, INC.

Current Principal Place of Business:

4611 JOHNSON ROAD
SUITE 2
COCONUT CREEK, FL 33073

New Principal Place of Business:

2743 PONCE DE LEON BLVD
DELRAY BEACH, FL 33552

Current Mailing Address:

4611 JOHNSON ROAD
SUITE 2
COCONUT CREEK, FL 33073

New Mailing Address:

2743 PONCE DE LEON BLVD
DELRAY BEACH, FL 33552

FEI Number: 20-2600311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCIULARA, MARIA D
4611 JOHNSON ROAD
SUITE 2
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

SCIULARA, MARIA D
2743 PONCE DE LEON BLVD
DELRAY BEACH, FL 33552 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: _____

Electronic Signature of Registered Agent

12/05/2006

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCIULARA, MARIA D
Address: 4611 JOHNSON ROAD, SUITE 2
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP () Delete
Name: COLLIN-GENOVA, STELLA R
Address: 4611 JOHNSON ROAD, SUITE 2
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCIULARA, MARIA D
Address: 2743 PONCE DE LEON BLVD
City-St-Zip: DELRAY BEACH, FL 33552

Title: VP (X) Change () Addition
Name: SHTIENBERG, DAVID
Address: 6237 OLD COURT ROAD
City-St-Zip: BOCA RATON, FL 33433

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.

SIGNATURE: MARIA SCIULARA

P

12/05/2006

Electronic Signature of Signing Officer or Director

Date