2006 FOR PROFIT CORPORATION
ANNUAL REPORT

Secretary of State **DOCUMENT # P05000080085** 05-01-2006 90399 032 ***150.00 TÁMPA BAR-B-Q, INC. Principal Place of Business Mailing Address 4745 SUTTON PARK CT., SUITE 301 4745 SUTTON PARK CT., SUITE 301 ουρτος 19 JACKSONVILLE, FL 32224 IACKSONVILLE, FL 32224 2. Principal Place of Business 3. Mailing Address 1120 E. Fouler Suite, Apt. #, etc. Suite, Apt. #, etc. 04212006 CR2E034 (11/05) 4. FEI Number 20-294808 City & State Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Regulred Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RAX CO 50 N. LAURA ST., SUITE 3300 JACKSONVILLE, FL 32202 Jacksonville 8. The above named entity submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar the obligations of regist SIGNATURE. 9. Election Campaign Financing \$5.00 May Bo FILE NOWIII FEB-18.\$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS TITLE ☐ Detete TITLE Change BLALES MALE STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY. \$1.7P ☐ Delete TITLE MALLE MANAGE STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZP TITLE Delete MLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Defete TITLE ☐ Attdition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP IITLE ☐ De!ete TITLE Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if chapter that the product of the SIGNATURE:

FILED

Jun 09, 2006 8:00 am