## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 10, 2006 8:00 am Secretary of State 04-28-2006 90152 003 \*\*\*150.00

DOCUMENT # P05000118716  1. Enlity Name CLOCK RESTAURANT 241, INC.									U	4-28-2	:006 90	0152 003 *	**150.00							
Principal Place of Business				Mailing Address				DUUH# * * *												
902 CLINT MOORE RD STE 126 BOCA RATON, FL 33487				902 CLINT MOORE RD STE 126 BOCA RATON, FL 33487				A DEPTERATE	* 25151 284		andi dinge he		Tricis or come							
2. Principal Place of Business				3. Mailing Address				1												
Suite, Apt. *, etc.				Suite, Apt. #, etc.				04042006	Ch	g-P	CR2	E034 (11/05)								
City & State			_1	City & State			06-1784			410	74	N	oplied For of Applicable							
Zip	Country		Zip	Zip Cou		try 5. Cer		5. Certificate	of Statu	a Desired		\$8.75 Ad Fee Require								
	6. Name and	Address of Curren	t Registe	red Agent				7. Name and	Addres	s of New	Register									
TRINGALI, S. JAMES						Nerne														
902 CLINT MOORE RD STE 126 BOCA RATON, FL 33487							Street Address (P.O. Box Number is Not Acceptable)													
					City					F	Zip Cod	le l								
8. The above	named entity subr	nits this statement	for the pur	rpose of changing its	register	ed office or r	register	ed agent, or bo	th, in the	State of			and accept							
the obligati	ons of registered a	sgent.																		
SIGNATURE	Signeture, typed or privile	ed name of regularitid sign	end into il a	policenia. (NOTI	Perpeters	d Agent signings	Derespor e	mpay sandthind)			CAT	E								
FILE NOWILL FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May 8e  Trust Fund Contribution.   Added to Fees																				
10.		ORS	11.			ADDITIONS	/CHANG	es to o	FFICERS A	ND DIRECTOR										
TITLE NAME	P TRINGALI, S. J	IAMES		Debrite (IT)								Change	Addition							
STREET ADDRESS CITY-51-21P		ORE RD STE 12	26		\$1स	ET ADORESS '-ST-ZIP														
TITLE	ST			Delete (1)		E					****	☐ Change	☐ Addition							
NAME STREET ADDRESS CITY-ST-ZIP	TRINGALI, JOHN M 902 CLINT MOORE RD STE 126					ET ADORESS '-51-78														
TITLE	BOCA RATON, FL 33487			☐ Defette	TITE				_			☐ Change	Addition							
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time	<u> </u>			☐ Delete	tift	-\$T-ZIP					<del>-</del>	☐ Change	☐ Addition							
NAME				- Descrip	HAN	1						- comp								
STREET ADDRESS CITY-ST-ZEP						HET ADDRESS '-ST-ZIP														
indicated of the cor	12. Thereby 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 ceth; 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																			
	$\bigcirc$	my	M	egili-	· 	708		changed, or on an attachment with an address, with all other like epipowered.  SIGNATURE: 4/106 J6/994-3440												