


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AF)

57. **FILED**  
**Jun 19, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90197 017 \*\*\*150.00

<b>DOCUMENT # P05000135907</b>	
1. Entity Name <b>MANNY'S CHOPHOUSE, INC.</b>	

Principal Place of Business <b>598 S RONALD REAGAN BLVD LONGWOOD FL 32750</b>	Mailing Address <b>598 S RONALD REAGAN BLVD LONGWOOD FL 32750</b>
--	--

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E034 (10/05)

4. FEI Number <b>16-1738177</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent <b>TATO, BREA L 598 S RONALD REAGAN BLVD LONGWOOD FL 32750</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
---	---

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
---	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>D TATO, BREA L 598 S RONALD REAGAN BLVD LONGWOOD FL 32750</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Brea L. Tato* **4/27/06** **404-261-9977**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT



66019800

108 MARKHAM WOODS ROAD • LONGWOOD, FL • 32779  
PHONE (407) 767-9977 • FAX (407) 767-9877

June 8, 2006

Florida Department of State  
Division of Corporations  
Attn: Annual Reports Section  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Reference Number : P05000135907

Dear Sir/Madam:

Enclosed please find the original Annual Report/Uniform Business Report which was returned for the following correction: ".....complete Block 4 by entering the Federal Employer Identification (FEI) number.....".

Please be advised that the FEI has been provided in Block 4. It is my understanding that you are still in possession of my check totaling \$150.00 and will proceed with the filing of the Report after receiving the corrected Report.

Thank you for your cooperation in this matter. Please do not hesitate to contact me if you need any additional information.

Sincerely,

Manny Tato  
*Signed in Mr. Tato's  
absence to avoid delay*

MT:fs

Enclosure: As stated above