2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000141855

FILED Oct 03, 2008 Secretary of State

Entity Name: 1ST LEM TURNER CRABHOUSE, INC. **Current Principal Place of Business: New Principal Place of Business:** 8676 LEM TURNER JACKSONVILLE, FL 32208 **Current Mailing Address: New Mailing Address:** 8676 LEM TURNER 8676 LEM TURNER JACKSONVILLE, FL JACKSONVILLE, FL 32208 FEI Number: 20-5896369 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORADI, MONIREH 8676 LEM TURNER JACKSONVILLE, FL 32208 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO () Delete Title: (X) Change () Addition SAFI, BABAK MORADI, MONIREH Name: Name: 8676 LEM TURNER 8676 LEM TURNER Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: JACKSONVILLE, FL 32208

(X) Delete Title: PTS Title: () Change () Addition

Name: MORADI, MONIREH Name: 8676 LEM TURNER Address: Address: JACKSONVILLE, FL 32216 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: MONIREH MORADI 10/03/2008