2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102881

Entity Name: 24/7 RESTAURANT GROUP, INC.

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1600 S. FEDERAL HWY., SUITE 1100 1600 SOUTH FEDERAL HIGHWAY POMPANO BCH, FL 33062

SUITE 1100

POMPANO BEACH, FL 33062

Current Mailing Address: New Mailing Address:

1600 S. FEDERAL HWY., SUITE 1100 1600 SOUTH FEDERAL HIGHWAY POMPANO BCH, FL 33062

SUITE 1100

POMPANO BEACH, FL 33062

JACOBS, RICK S ESQ.

FEI Number: 26-1105173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JACOBS, RICK S ESQ. 1600 S. FEDERAL HWY., SUITE 1100

1600 SOUTH FEDERAL HIGHWAY POMPANO BCH, FL 33062 SUITE 1101

POMPANO BEACH, FL 33062 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: 01/08/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

Title:

City-St-Zip:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

JACOBS, ADAM T JACOBS, ADAM T Name: Name:

1600 S. FEDERAL HWY., SUITE 1100 1600 SOUTH FEDERAL HIGHWAY, SUITE 1100 Address: Address:

City-St-Zip: POMPANO BCH, FL 33062 City-St-Zip: POMPANO BEACH, FL 33062

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

JACOBS, RICK S Name: JACOBS, RICK S Name:

1600 S. FEDERAL HWY., SUITE 1100 1600 SOUTH FEDERAL HIGHWAY, SUITE 1100 Address: Address:

POMPANO BEACH, FL 33062 POMPANO BCH, FL 33062 City-St-Zip:

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

MILLER, MARK J Name: MILLER, MARK J Name:

1600 S. FEDERAL HWY., SUITE 1100 Address: 1600 SOUTH FEDERAL HIGHWAY, SUITE 1100 Address:

City-St-Zip: POMPANO BCH, FL 33062 City-St-Zip: POMPANO BEACH, FL 33062

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.

SIGNATURE: ADAM T. JACOBS **PRES** 01/08/2008