2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 18, 2007 08:00 AM Secretary of State

| DOCUMENT # P9300002075 1. Entity Name BUFFALO'S REEF RESTAURANT CONCEPTS, INC. | | | And the state of t | Seci | etary or Stat | | |
|---|--|--------------------|--|---|--|--|--|
| Principal Place of Business 116 EGLIN PRKWY NE 116 EGLIN PRKWY NE FORT WALTON BEACH, FL 32548 US Mailing Address 116 EGLIN PRKWY NE FORT WALTON BEACH, FL 32548 US | | | | | | | |
| NEW WHIE IN THIS SPACE | | | | | | | |
| | | | 07162007 No Chg-P CR2E034 (11/05) | | | | |
| | | | 4. FEI Numb 59-316 | | Applied For Not Applicable | | |
| | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | | |
| 6. Name and Address of Current Registered Agent | | | | | | | |
| HANLEY, MICHAEL C 3807 CHERRYWOOD CT. NICEVILLE, FL 32578 | | NAME OF THE OFFICE | | | | | |
| | | | | | | | |
| 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 Rorlda. I am familiar with, and accept the obligations of registered agent. | | | | | | | |
| SIGNATURE Signature, typoid or printed name of registered agent and title if applicable INOTE. Registered Agent signature registered when re-risuating) ATE | | | | | | | |
| FILE NOWIII FEE IS \$150.00 Due by September 14, 2007 9. Election Campaign Finan Trust Fund Contribution. | | | .00 May Be led to Fees | in accordance with s. corporation did not rec | 307.193(2)(b), F.S., the eive the prior notice. | | |
| 10. OFFICERS AND DIR | ECTORS | 22 | | | Acc No. | | |
| WAVE HANLEY, MICHAEL IRSET ADDRESS 640 POMPANO AVE. ITY-ST-ZIP FORT WALTON BEACH, FL 32548 | | | • | 1/10000 0769 4 117/18/07-800 | 133 06-025 158.75 | | |
| THE PORT WALLOW BEACH, PL 32540 | - | | | | auconstructure and a second and | | |
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| STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| TITLE NAME | | | | | | | |
| STREET ADDRESS | | | | | | | |
| 12. I hereby certify that the information supplied with this | filing does not qualify for the ex- | emptions contained | f in Chapter 11 | 9, 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 cath; 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: | | | | | | | |