


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90025 044 ***150.00

DOCUMENT # P94000045124 1. Entity Name BARA RESTAURANTS, INC.	
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Principal Place of Business 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819 US	Mailing Address 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819 US
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40066831

2. Principal Place of Business - No P.O. Box # 7932 W. Sand lake Rd.	3. Mailing Address 7932 W. Sand lake Rd.
Suite, Apt. #, etc. Suite 300	Suite, Apt. #, etc. Suite 300
City & State Orlando, FL	City & State Orlando, FL
Zip 32819	Country
Zip 32819	Country

03112008 Chg-P CR2E034 (12/06)

4. FEI Number 59-3263164	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KHATIB, RASHID A 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819	Name Street Address (P.O. Box Number is Not Acceptable) 7932 W. Sand Lake Rd. Ste 300 City Orlando, FL 32819 FL 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD KHATIB, RASHID A 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7932 W. Sand Lake Rd. Ste 300 Orlando, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAALI, BASSEL 7582 W. SAND LAKE ROAD ORLANDO, FL 32819 <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	D KHOURI, ZAH W 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7932 W. Sand Lake Rd. Ste 300 Orlando, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HODGE, RANDALL R 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7932 W. Sand Lake Rd. Ste 300 Orlando, FL 32819
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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 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/18/08 407-354-2200