2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000069783

1. Entity Name

ATLANTA ALE HOUSE AND RAW BAR, INC.



Principal Place of Business

612 N. ORANGE AVE., SUITE C-6 JUPITER, FL 33458 Mailing Address

612 N. ORANGE AVE., SUITE C-6 JUPITER, FL 33458

FILED Apr 27, 2005 08:00 AM Secretary of State



 \Box

DO NOT WRITE IN THIS SPACE

04252005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0567316

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, JOHN W 612 N. ORANGE AVE., SUITE C-6 JUPITER, FL 33458

DO NOT WRITE IN THIS SPACE

		Ì			
the obligati	ons of registered agent.	urpose of changing its registered office of	or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or prioted name of registered agent and title if	applicable, (NOTE, Registered Agent signs	ature required when reinstating)	DATE	
	E NOW!!! FEE 13 \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, JOHN W 612 N ORANGE AVE STE C-6 JUPITER, FL 33458			U00000334428 04/27/05-80043-018 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				04/27/05-80043-018,150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
rile Name Street Address City -St-Zip			IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP			, , , , , , , , , , , , , , , , , , , ,		
TITLE NAME STREET ADDRESS					

12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 arriginal formation with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING DIFFICER OR DIRECTOR

4/21/05

561-743-2299

Daytime Phon