

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000006600

FILED
Apr 24, 2002 8:00 AM
Secretary of State

Entity Name: RTA RESTAURANTS CORP.

Current Principal Place of Business:

3921 SW 47TH AVENUE
STE 1021
DAVIE, FL 33314 US

New Principal Place of Business:

825 W. BITTERS ROAD
#204
SAN ANTONIO, TX 78216 US

Current Mailing Address:

825 WEST BITTERS ROAD
SUITE 204
SAN ANTONIO, TX 78216

New Mailing Address:

FEI Number: 65-0672306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONDON, SHELDON
9301 SW 94TH PLACE
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ST. JUSTE, ROBESPIERRE
Address: 3921 SW 47TH AVENUE STE 1021
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ST. JUSTE, ROBESPIERRE
Address: 825 W. BITTERS ROAD, #204
City-St-Zip: SAN ANTONIO, TX 78216

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBESPIERRE ST. JUSTE

PRES

04/24/2002

Electronic Signature of Signing Officer or Director

_____ Date