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**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P96000028127		
1. Entity Name PINEDA CROSSING BAR & GRILL, INC.		
Principal Place of Business 2515 ROBERTS ROAD MELBOURNE, FL 32940		Mailing Address 2515 ROBERTS ROAD MELBOURNE, FL 32940
DO NOT WRITE IN THIS SPACE		
		03282005 No Chg-P CR2E034 (10/03)
4. FEI Number 59-3369123		Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent POPP, CATHERINE L 2515 ROBERTS ROAD MELBOURNE, FL 32940		DO NOT WRITE IN THIS SPACE
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE	D	
NAME	POPP, CATHERINE L	
STREET ADDRESS	2554 EMPIRE AVE.	
CITY-ST-ZIP	MELBOURNE, FL 32934	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Catherine L. Popp</u> <u>Catherine L. Popp</u> <u>3/28/04</u> <u>(321) 259-7760</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>