2008 FOR PROFIT CORPORATION

ANNUAL REPORT FILED May 07, 2008 08:00 AN Secretary of State **DOCUMENT # P96000055439** 1. Entity Name LTD RESTAURANTS, INC. Principal Place of Business Mailing Address 2275 ATLANTIC BLVD PO BOX 330108 NEPTUNE BEACH, FL 32266 ATLANTIC BEACH, FL 32233-0108 05062008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3385818 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SORRELL, MARY C DO NOT WRITE 2275 ATLANTIC BLVD NEPTUNE BEACH, FL 32266 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 1 am familiar with, and accept the obligations of registered agent. 06/03/08-800T8-012 150.00 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Due by September 12, 2008 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. **PTSD** TITLE HIONIDES, CHRIS NAME 2275 ATLANTIC BLVD STREET ADDRESS CITY-ST-ZIP NEPTUNE BEACH, FL 32266 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME 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 exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplier ental 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 a other like empowered. 904-241-1501

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CITY-ST-ZIP

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