

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000057420

Entity Name: EMERIL'S OF ORLANDO, INC.

FILED  
Jan 26, 2006  
Secretary of State

**Current Principal Place of Business:**

6000 UNIVERSAL BLVD  
#702  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

829 ST CHARLES AVE  
NEW ORLEANS, FL 70130

**New Mailing Address:**

829 ST CHARLES AVE  
NEW ORLEANS, LA 70130

FEI Number: 72-1408490

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RICE, CYNTHIA I ESQ  
1253 PARK STREET  
CLEARWATER, FL 33756 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: M ( ) Delete  
Name: LAGASSE, EMERIL J  
Address: 829 ST CHARLES AVE  
City-St-Zip: NEW ORLEANS, LA 70130

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CHEF (X) Change ( ) Addition  
Name: LAGASSE, EMERIL J  
Address: 829 ST CHARLES AVE  
City-St-Zip: NEW ORLEANS, LA 70130

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: EMERIL J LAGASSE III

CHEF

01/26/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date