2006 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P96000099091

1. Entity Name

PASTA RESTAURANTS OF NFL. INC.

Principal Place of Business

1938 N WOODLAWN SUITE 400 WICHITA, KS 67208

Mailing Address

1938 N WOODLAWN SUITE 400 WICHITA, KS 67208

FILED Apr 06, 2006 8:00 am Secretary of State

04-06-2006 90023 038 ***150.00

50009587

Fee Required



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 43-1770288 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

TAYLOR, MICHAEL 2924 CREEKWOOD DR CANTONMENT, FL 32533

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAI

Brenda J. Butler, President

DO NOT WRITE IN THIS SPACE

3/28/2006

Date

316/634-3306

Daytime Phone #

03282006

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						
	Signature, typed or printed frame or registered agent and life	i applicable, (NOTE, Reg	istered Agent signaturi	required when reinstating)	DATE	
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.			~ _	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BUTLER, BRENDA J 1938 N WOODLAWN SUITE 400 WICHITA, KS 67208					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
THLE NAME STREET ADDRESS CITY-ST-ZIP						
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 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.						