## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000022336

City-St-Zip:

INDIAN ROCKS BEACH, FL 34635 US

FILED Mar 07, 2006 Secretary of State

Entity Nan	ne: CB TYRONE RESTAURANT CORP.	
Current Principal Place of Business:		New Principal Place of Business:
KRESS BLDG., SUITE 202 475 CENTRAL AVENUE ST. PETERSBURG, FL 33701 US		KRESS BUILDING, SUITE 202 475 CENTRAL AVENUE ST. PETERSBURG, FL 33701 US
Current Mailing Address:		New Mailing Address:
475 CENTE	ST L. MASCARA, P.A. RAL AVENUE, SUITE 202 RSBURG, FL 33701 US	
FEI Number:	59-3565855 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:
MASCARA, ERNEST L KRESS BLDG., STE. 202 475 CENTRAL AVENUE ST. PETERSBURG, FL 33701 US		MASCARA, ERNEST L KRESS BUILDING, SUITE. 202 475 CENTRAL AVENUE ST. PETERSBURG, FL 33701 US
The above in the State		ne purpose of changing its registered office or registered agent, or both,
SIGNATURE: ERNEST L. MASCARA		03/07/2006
	Electronic Signature of Registered	Agent Date
Election Carr	npaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	VD () Delete POWERS, GREGORY 401 GULF BOULEVARD INDIAN ROCKS BEACH, FL 34635 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VTD ( ) Delete LODER, GEORGE 401 GULF BOULEVARD INDIAN ROCKS BEACH, FL 34635 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name:	PSD () Delete LODER, MATTHEW 401 GUI F BOUL EVARD	Title: ( ) Change ( ) Addition Name: Address:

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.

City-St-Zip:

SIGNATURE: MATTHEW LODER **PSD** 03/07/2006