2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000027650

City-St-Zip:

BOCA RATON, FL 33431

Entity Name: SRO RESTAURANT MANAGEMENT INC.

FILED Apr 13, 2007 Secretary of State

	iner one ne	STAGIO (IVI IVI) (IVA GELVIEIVI, I	110.		
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	IGRESS AVEN TON, FL 3348				
Current Mailing Address:			New Mailing Address:	:	
	IGRESS AVEN TON, FL 3348				
FEI Number: 65-0848152 FEI Number Applied For()		FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
C\O HOD(1801 N. M	R, MITCHELL GSON RUSS L ILITARY TRAIL TON, FL 3343	_, SUITE 200			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (DONOVAN, PE 5101 CONGRE BOCA RATON,	SS AVENUE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	KIRLAND, ROE 5101 CONGRE	SS AVENUE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	KIRSCHNER, N) Delete //ITCHELL B \RY TRAIL STE 200	Title: (Name: Address:) Change () Addition	

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: PETER DONOVAN PD 04/13/2007