

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000070476

Entity Name: MOBAY'S GRILLE, INC.

FILED
Feb 19, 2007
Secretary of State

Current Principal Place of Business:

4324 LAKE LUCERNE CIRCLE
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

C/O BETTY WALLACE
1302 NORTH N ST
LAKE WORTH, FL 33460

New Mailing Address:

FEI Number: 65-0948579 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERGUSON, DARL
2000 NORTH CONGRESS AVE
SUITE 208
WEST PALM BEACH, FL 33409 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: P () Delete
Name: JOHNSON, ELSA
Address: 4324 LAKE LUCERNE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VP () Delete
Name: JOHNSON, WINSTON
Address: 4324 LAKE LUCERNE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VP () Delete
Name: BOHANAN, JAMES P
Address: 1302 NORTH N STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: ST () Delete
Name: WALLACE, BETTY
Address: 1302 NORTH N ST
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BETTY WALLACE

ST

02/19/2007

Electronic Signature of Signing Officer or Director

_____ Date