


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 26, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S88501</b> 1. Entity Name WALGREENS PLAZA RESTAURANT, INC.	
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Principal Place of Business 1001 S.W. 2ND AVE. SUITE 6 BOCA RATON, FL 33432 US	Mailing Address 10058 SPANISH ISLES BLVD F12 BOCA RATON, FL 33498 US
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01292007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0288852  Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PITO, JR., FRANK  
 10058 SPANISH ISLES BLVD  
 F12  
 BOCA RATON, FL 33498

DO NOT WRITE  
IN THIS SPACE

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: *Frank Pito* (NOTE: Registered Agent signature required when reinstating) DATE: 2/12/07

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

1100001646700  
 113/06/07-80043-023 150.00

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	PITO, CATERINA
STREET ADDRESS	9044 LONG LAKE PALMS DR.
CITY-ST-ZIP	BOCA RATON, FL 33496
TITLE	PTS
NAME	PITO, FRANK J
STREET ADDRESS	9676 RICHMOND CIR
CITY-ST-ZIP	BOCA RATON, FL 33434
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

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.

SIGNATURE: *Frank Pito* DATE: 2/12/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #