

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V12397

Entity Name: BOCA DINER, INC.

FILED
Apr 01, 2009
Secretary of State

Current Principal Place of Business:

17701 PINE NEEDLE TERRACE
BOCA RATON, FL 33487 US

New Principal Place of Business:

2801 NORTH FEDERAL HWY
BOCA RATON, FL 33431 US

Current Mailing Address:

17701 PINE NEEDLE TERRACE
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 65-0307680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRANTALIS, DEAN J., ESQ.
2255 WILTON DR
WILTON MANORS, FL 33305 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: PELEKANOS, STEVE
Address: 17701 PINENEEDLE TER.
City-St-Zip: BOCA RATON, FL

Title: VP () Delete
Name: PELEKANOS, ATHENA
Address: 17701 PINENEEDLE TER.
City-St-Zip: BOCA RATON, FL

Title: T () Delete
Name: PELEKANOS, JOHN
Address: 4217 CEDAR CREEK DRIVE
City-St-Zip: BOCA RATON, FL 33487

Title: S () Delete
Name: PELEKANOS, MARIA
Address: 301 CLUB CIRCLE #102
City-St-Zip: BOCA RATON, FL 33487

Title: D () Delete
Name: PELEKANOS, NICOLE
Address: 4217 CEDAR CREEK DR.
City-St-Zip: BOCA RATON, FL 33487

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: STEVE PELEKANOS

PRES

04/01/2009

Electronic Signature of Signing Officer or Director

Date