

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S13656

Entity Name: RESTAURANT ADVENTURES, INC.

Current Principal Place of Business:

1016 EAST SEMORAN BLVD
CASSELBERRY, FL 32751

Current Mailing Address:

1016 EAST SEMORAN BLVD
CASSELBERRY, FL 32751

FEI Number: 59-3038859

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALDERS, SUSAN
105 OAKLEIGH DR
MAITLAND, FL 32751 US

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

Officer/Director Detail :

Title PVST
Name ALDERS, BLAKE C
Address 105 OAKLEIGH DR
City-State-Zip: MAITLAND FL 32751

I hereby 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 all other like empowered.

SIGNATURE: BLAKE C ALDERS

PRESIDENT

02/25/2015

Electronic Signature of Signing Officer/Director Detail

Date