

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004583

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** BACK BAY RESTAURANT GROUP, INC.

**Current Principal Place of Business:**

284 NEWBURY STREET  
BOSTON, MA 02115

**New Principal Place of Business:**

**Current Mailing Address:**

284 NEWBURY STREET  
BOSTON, MA 02115

**New Mailing Address:**

**FEI Number:** 04-2812651

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: CD  
Name: SARKIS, CHARLES F  
Address: 284 NEWBURY STREET  
City-St-Zip: BOSTON, MA 02115

Title: PCEO  
Name: SARKIS, CHARLES F  
Address: 284 NEWBURY STREET  
City-St-Zip: BOSTON, MA 02115

Title: CFO  
Name: DALTON, RICHARD P  
Address: 284 NEWBURY STREET  
City-St-Zip: BOSTON, MA 02115

Title: VTAS  
Name: CIAMPA, ROBERT J  
Address: 284 NEWBURY STREET  
City-St-Zip: BOSTON, MA 02115

Title: V  
Name: LAGROTTERIA, ANNE MARIE  
Address: 284 NEWBURY STREET  
City-St-Zip: BOSTON, MA 02115

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: RICHARD P. DALTON

CFO

01/11/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date