

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 626890

**FILED  
Mar 15, 2006  
Secretary of State**

**Entity Name:** FOOD SPOT NO. 44 INCORPORATED

**Current Principal Place of Business:**

6101 SW 123 TERR.  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

6101 SW 123 TERR.  
MIAMI, FL 33156

**New Mailing Address:**

**FEI Number:** 59-1914744      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVE.,  
STE. 125  
CORAL GABLE, FL 33146 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: PD ( ) Delete  
Name: HARRIS, LARRY J  
Address: 6101 SW 123 TERR.  
City-St-Zip: MIAMI, FL 33156

Title: EXVP ( ) Delete  
Name: WILNER, BRUCE S  
Address: 6101 SW 123 TERR.  
City-St-Zip: MIAMI, FL 33156

Title: S ( ) Delete  
Name: HARRIS, DOLORES  
Address: 6101 SW 123 TERR.  
City-St-Zip: MIAMI, FL 33156

**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:

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: BW

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

EVP

03/15/2006

\_\_\_\_\_  
Date