



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2006 8:00 am
Secretary of State

01-17-2006 90238 025 ***150.00

| | | | |
|---|---|--|--|
| DOCUMENT # P97000046824 | |  | |
| 1. Entity Name SNACK-EM-UP INC. | | | |
| Principal Place of Business 532 NW BRINKLEY TER LAKE CITY, FL 32055 | | Mailing Address 532 NW BRINKLEY TER LAKE CITY, FL 32055 | |
| DO NOT WRITE IN THIS SPACE | | | |
| | |  01092006 No Chg-P CR2E034 (11/05) | |
| | | 4. FEI Number 59-3424800 | Applied For <input type="checkbox"/> Not Applicable |
| | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent TUELL, DONALD T 532 NW BRINKLEY TER LAKE CITY, FL 32055 | | | 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: <u><i>Donald T. Tuell</i></u> 2/6/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retreating) DATE</small> | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD TUELL, DONALD 532 NW BRINKLEY TER LAKE CITY, FL 32055 | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | SD TUELL, CATHY WILLIAMS 532 NW BRINKLEY TER LAKE CITY, FL 32055 | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | | |
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| 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: <u><i>Cathy M. Tuell</i></u> 2/6/06 3867549433 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> | | | |



ATTACHMENT
66001289

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 24, 2006

SNACK-EM-UP INC.
532 NW BRINKLEY TER
LAKE CITY, FL 32055

Subject: SNACK-EM-UP INC.

Reference Number: P97000046824

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm

ANNUAL REPORTS SECTION