



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000007937			
1. Entity Name DEBBIE'S DINER INC.			
Principal Place of Business 1415 S. HARBOR DRIVE MERRITT ISLAND, FL 32952	Mailing Address 1415 S. HARBOR DRIVE MERRITT ISLAND, FL 32952		
DO NOT WRITE IN THIS SPACE			
		01312007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 20-0530029	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 MASSIMILLA, DEBRA L 1415 S. HARBOR DRIVE MERRITT ISLAND, FL 32952		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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		DO NOT WRITE IN THIS SPACE 000000617503 02/07/07-80078-009 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASSIMILLA, DEBRA L 1415 S. HARBOR DRIVE MERRITT ISLAND, FL 32952		
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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: <i>Debra L Massimilla</i>		Date <i>1-31-07</i> Daytime Phone # <i>321-459-3209</i>	