


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007 08:00 AM
Secretary of State

DOCUMENT # L87393	
1. Entity Name WEST PALM BEACH DONUTS, INC.	

Principal Place of Business 1301 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411 US	Mailing Address 1301 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH, FL 33411 US
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DO NOT WRITE IN THIS SPACE



01312007 No Chg-P CR2E034 (11/05)

4. FEI Number 05-0455624	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MANUEL, ANDRADE S 53 ST THOMAS DR. ***** PALM BEACH GARDENS, FL 33418

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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 _____ (NOTE: Registered Agent signature required when reinstating) 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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANDRADE, MANUEL S. 53 ST. THOMAS DRIVE PALM BEACH GARDENS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RUBIANO, STEVEN C 108 VILLA BELLA JUPITER, FL 334582728
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RUBIANO, SUSAN A 108 VILLA BELLA JUPITER, FL 334582728
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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02/14/07-80061-009 158.75

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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: 	SUSAN RUBIANO, SEC. 2.1.07	561 791.0039
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #