

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000106026

Entity Name: TASTE OF GREECE, INC.

Current Principal Place of Business:

MYKONOS REST
145 WEKIVA SPRINGS RD. 133
LONGWOOD, FL 32779

Current Mailing Address:

MYKONOS REST
145 WEKIVA SPRINGS RD. 133
LONGWOOD, FL 32779 US

FEI Number: 59-3755562

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAROUTSOS, KOSTADIA T
305 SIR LAWRENCE DR.
SANFORD, FL 32773 US

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

Officer/Director Detail :

Title PST
Name KAROUTSOS, KOSTADIA
Address 305 SIR LAWRENCE DR.
City-State-Zip: SANFORD FL 32773

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: KOSTADIA KAROUTSOS

PRESIDENT

04/30/2020

Electronic Signature of Signing Officer/Director Detail

Date