2005 FOR PROFIT CORPORATION

FILED Jan 20, 2005 08:00 AM **ANNUAL REPORT Secretary of State DOCUMENT # 550454** FORT WALTON RESTAURANT EQUIPMENT, INC. Principal Place of Business Mailing Address 106 PERRY AVENUE S.E. 106 PERRY AVENUE S.E. FT. WALTON BCH, FL 32548 FT, WALTON BCH, FL 32548 CR2E034 (10/03) 01172005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1782595 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FIFE, DEE L. DO NOT WRITE 106 PERRY AVENUE S.E. FT, WALTON BCH, FL 32548 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing **\$5.00** May Be \Box Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PVD TITLE FIFE, DEE L NAME STREET ADDRESS 106 PERRY AVENUE S.E. CITY-ST-ZIP FT WALTON BCH, FL \$TD TITLE FIFE, FREDA J. STREET ADDRESS 106 PERRY AVENUE S.E. FT WALTON BCH, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP