2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 611295

FILED Jul 14, 2008 Secretary of State

Entity Name: TILLY'S YELLOW STRAWBERRY, INC.

Current Principal Place of Business:			New Principal Place of Business:	
	GLER AVE T, FL 33040	us		
Current M	ailing Addres	ss:	New Mailing Address	s:
	GLER AVE T, FL 33040	US		
El Number:	: 59-1905922	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and Address o	of New Registered Agent:
	OSEVELT BL			
(LI WLO	T, FL 33040	US		
Γhe above			ourpose of changing its registered	d office or registered agent, or both,
The above n the State	named entity : e of Florida. RE:	submits this statement for the p		d office or registered agent, or both,
Γhe above	named entity : e of Florida. RE:			d office or registered agent, or both, Date
The above n the State SIGNATUR n accordan	named entity : e of Florida. RE: Electror ce with s. 607.19	submits this statement for the particles of Registered Age (3(2)(b), F.S., the corporation did no	ent	
The above n the State BIGNATUF n accordan Election Car	named entity : e of Florida. RE: Electror ce with s. 607.19	submits this statement for the pair of the pair of Signature of Registered Age 3(2)(b), F.S., the corporation did not g Trust Fund Contribution ().	ent of receive the prior notice.	
The above n the State BIGNATUF n accordan Election Car	named entity : e of Florida. RE: Electror ce with s. 607.19 npaign Financin	submits this statement for the particle Signature of Registered Age 3(2)(b), F.S., the corporation did not g Trust Fund Contribution (). TORS: Delete AAA., RAVE	ent of receive the prior notice.	Date
The above not the State SIGNATUR not accordant Election Car DFFICER: state sta	named entity : e of Florida. RE: Electror ce with s. 607.19 mpaign Financing S AND DIREC PD () LARIZ, MATILD 3354 FLAGLEF KEY WEST, FL	submits this statement for the particle Signature of Registered Age 3(2)(b), F.S., the corporation did not growth fund Contribution (). TORS: Delete AAA., AVE.	ent of receive the prior notice. ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MATILDA LARIZ PRES 07/14/2008