

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001241

FILED
Feb 01, 2008
Secretary of State

Entity Name: THE GRATEFUL PALATE OF CALIFORNIA, INC.

Current Principal Place of Business:

701 DEL NORTE BLVD., UNIT #210
OXNARD, CA 93030

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5107
OXNARD, CA 93031

New Mailing Address:

FEI Number: 77-0489351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENNISI, DAVID
1425 WATER TOWER ROAD
LAKE PARK, FL 33403 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: PHILIPS, DANIEL S
Address: 1317 LA JOLLA
City-St-Zip: THOUSAND OAKS, CA 91362

Title: CNTR () Delete
Name: DESANTIS, BEN
Address: 4725 DEL RIO ST
City-St-Zip: SIMI VALLEY, CA 93063

Title: PS () Delete
Name: FAVER, ROBERT
Address: 2112 LOAN OAK
City-St-Zip: NAPA, CA 94558

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: SABAD, ALEJANDRO
Address: 5185 VIA JACINTO
City-St-Zip: NEWBURY PARK, CA 91320

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: BEN DESANTIS

CNTR

02/01/2008

Electronic Signature of Signing Officer or Director

_____ Date