2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006519

City-St-Zip:

PHILADELPHIA, PA 19148

Entity Name: OVATIONS FOOD SERVICES, INC

FILED Mar 24, 2008 Secretary of State

Littly Na	ille. OVATIOI	NOT OOD SERVICES, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
244 CRYSTAL GROVE BLVD LUTZ, FL 33548				18221 US HIGHWAY 41 NORTH LUTZ, FL 33549			
Current Mailing Address:				New Mailing Address:			
244 CRYSTAL GROVE BLVD LUTZ, FL 33548				18221 US HIGHWAY 41 NORTH LUTZ, FL 33549			
FEI Number	: 23-3035415	FEI Number Applied For ()	FEI Number Not	Applicable ()	Certificate of Status Desire	ed ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
WICKNER, TODD 244 CRYSTAL GROVE BLVD LUTZ, FL 33548 US				WICKNER, TODD 18221 US HIGHWAY 41 NORTH LUTZ, FL 33549 US			
The above in the State	named entity e of Florida.	submits this statement for the	purpose of chang	ing its registered	l office or registered agent,	or both,	
SIGNATURE:				03/24/2008			
	Electro	nic Signature of Registered Ag	ent		Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	LUUKKO, PET	BROAD STREET	Title: Name: Address City-St-:	:	() Change () Addition		
Title: Name: Address: City-St-Zip:	LIPSTEIN, SÀN	BROAD STREET	Title: Name: Address City-St-J	:	() Change () Addition		
Title: Name: Address:	WEINBERG, P) Delete HILIP I BROAD STREET	Title: Name: Address		() Change () Addition		

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.

City-St-Zip:

SIGNATURE: SANFORD LIPSTEIN VTD 03/24/2008