## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Feb 01, 2008 8:00 am Secretary of State DOCUMENT #F02271 02-01-2008 90015 002 \*\*\*150 00 1. Entity Name TALLAHASSEE KITCHEN CENTER, INC. Principal Place of Business Mailing Address duara 634 E. PARK AVE. 634 E. PARK AVE. TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 US 01092008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2030796 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GRABOWSKI, PAUL M DO NOT WRITE 4444 WIDGEON WAY TALLAHASSEE, FL 32303 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) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10 OFFICERS AND DIRECTORS TITLE GRABOWSKI, PAUL M. NAME 4444 WIDGEON WAY STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32303 TITLE GRABOWSKI, SUSAN M NAME 4444 WIDGEON WAY STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32303 NAME GRABOWSKI, SUSAM M 4444 WIDGEON WAY STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TALLAHASSEE, FL 32303 IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

TITLE

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

**FILED**