

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003618

FILED
Apr 10, 2008
Secretary of State

Entity Name: TOSSED FRANCHISE CORPORATION

Current Principal Place of Business:

401 E. LAS OLAS BLV.D, SUITE 1500
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

401 E. LAS OLAS BLV.D, SUITE 1500
FT. LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 51-0499672

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JASON, CHODASH
401 EAST LAS OLAS BLVD
SUITE 1500
FORT LAUDERDALE, FL 33301 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: EVPD () Delete
Name: CHODASH, JASON
Address: 411 N. NEW RIVER DRIVE EAST, APT. 2806
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VD () Delete
Name: MEISEL, MARC
Address: 77 PHEASANT RUN
City-St-Zip: MILLWOOD, NY 10546

Title: SD () Delete
Name: CHODASH, BRUCE
Address: 411 N. NEW RIVER DRIVE EAST, APT. 2806
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D () Delete
Name: HERZBERG, DAREN
Address: 160 WEST 86TH STREET, APT. 4BC
City-St-Zip: NEW YORK, NY 10024

Title: D () Delete
Name: COHEN, ADAM
Address: 64 THOMPSON STREET, APT. 16
City-St-Zip: NEW YORK, NY 10012

Title: PD () Delete
Name: ERIC, SCHMITT
Address: 3020 NE 32ND AVE #914
City-St-Zip: FORT LAUDERDALE, FL 33308

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: D (X) Change () Addition
Name: HERZBERG, DAREN
Address: 26 E. 10TH STREET APT 4C
City-St-Zip: NEW YORK, NY 10003

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

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

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: JASON CHODASH

EVP

04/10/2008

Electronic Signature of Signing Officer or Director

Date