2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

DOCUMENT# F51405

Entity Name: CHICK'N PORTIONS, INC.

Current Principal Place of Business:

C/O STEPHEN M. GREENE
12701 NW 38TH AVENUE
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

C/O STEPHEN M. GREENE
12701 NW 38TH AVENUE
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 59-2146917 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREENE, STEPHEN M.
12701 NW 38TH AVENUE
OPA LOCKA, FL 33054 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:	PREZ	( ) Delete
Name:	GREENE, STEPHEN M	
Address:	3400 SW 27 AVE	
City-St-Zip:	COCONUT GROVE, FL 33133 US	
Title:	VP	( ) Delete
Name:	REISMAN, STUART	
Address:	2458 GREENBRIER COURT	
City-St-Zip:	WESTON, FL 33327 US	
Title:	VP	( ) Delete
Name:	COLON, MARIA	
Address:	5800 LEONARDO ST.	
City-St-Zip:	CORAL GABLES, FL 33146 US	
Title:	VP	( ) Delete
Name:	GREENE, JEFFREY A	
Address:	1 CENTURY LANE-VISTA 201	
City-St-Zip:	MIAMI BEACH, FL 33139 US	

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:	( ) 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: MARIA COLON VP 04/22/2008

Electronic Signature of Signing Officer or Director — Date