


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2005 8:00 am
Secretary of State

07-01-2005 90003 027 ***150.00

DOCUMENT # F86427 1. Entity Name CONCEPT FOODS, INC.					
Principal Place of Business 10006 GRIFFIN RD COOPER CITY, FL 33328			Mailing Address 10006 GRIFFIN RD COOPER CITY, FL 33328		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2213025	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PIACENTINO, CHRIS 7532 SW 28 STREET DAVIE, FL 33314			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ (NOTE: Registered Agent signature required when reappointing) <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>PIACENTINO, CHRIS</i>		
NAME	PIACENTINO, CHRIS	NAME	<i>14800 S.W. 21ST</i>		
STREET ADDRESS	7532 SW 28 ST	STREET ADDRESS	<i>DAVIE, FL - 33326</i>		
CITY-ST-ZIP	DAVIE, FL 33314	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
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CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 information.					
SIGNATURE: _____		Date: <i>6/28/05</i>		Daytime Phone #: <i>954-434-7255</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

Landlubbers
Raw Bar
&
Grill

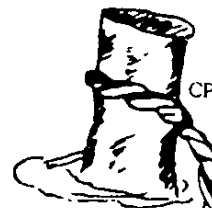


ATTACHMENT

F86427

6/28/2005

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To whom it may concern:

This letter is in response to a Notice of "Intent to Dissolve" post card I received today. I understand that this is regarding our annual corporate report that is past due.

This is the first notice we have received regarding this matter. Enclosed you will find a check in the amount of \$150.00 for our filing and registration.

Sincerely,

Chris Piacentino, Pres.

P.S.- I noticed that my old address was still listed on the application. I made the corrections. Perhaps this will solve the problem in the future.