2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J53212

Entity Name: GARDNER'S KITCHENS, INC.



Current Principal Place of Business: New Principal Place of Business:

9351 SW 56 ST 18001 OLD CUTLER ROAD MIAMI, FL 33165 US

SUITE 362

PALMETTO BAY, FL 33157 US

Current Mailing Address: New Mailing Address:

1 FINANCIAL PLAZA STE 1400 100 SW 3RD AVE FORT LAUDERDALE, FL 33394 US

FEI Number: 59-2756735 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PLOUCHA, LAWRENCE M ESQ. 1 FINANCIÁL PLAZA STE 1400 100 SE 3RD AVE FORT LAUDERDALE, FL 33394 US

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.

Title:

Name:

SIGNATURE: Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition GARDNER, JOSEPH T., GARDNER, JOSEPH T., Name:

12374 SW 82ND AVE 18001 OLD CUTLER ROAD Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: PALMETTO BAY, FL 33157

Title: DC Title: DCEO (X) Change () Addition () Delete Name: ADAMS, MAURICE D., Name: ADAMS, MAURICE D.,

12374 SW 56TH STREET 18001 OLD CUTLER ROAD Address: Address: MIAMI, FL PALMETTO BAY, FL 33157 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition DPST () Delete DPST

ADAMS, ELIZABETH G. ADAMS, ELIZABETH G., Name: Name: 12374 SW 56TH STREET 18001 OLD CUTLER ROAD Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: PALMETTO BAY, FL 33157

Title: () Delete Title: (X) Change () Addition SCHWARTZ, LOUISE G GARDNER-SCHWARTZ, LOUISE Name: Name: Address: 12374 SW 56TH STREET Address: 18001 OLD CUTLER ROAD City-St-Zip: City-St-Zip: MIAMI, FL 33165 PALMETTO BAY, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the 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: MAURICE D. ADAMS CEO 05/05/2006