


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # J97196 1. Entity Name MIDDLEBY WORLDWIDE, INC.	
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Principal Place of Business 2876 SW 180 AVE MIRAMAR, FL 33025	Mailing Address 1400 TOASTMASTER DRIVE ELGIN, IL 60120
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03292007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0033271	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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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 reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO BASSOUL, SELIM A 1400 TOASTMASTER DRIVE ELGIN, IL 60120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SIDANI, SAM 1400 TOASTMASTER DRIVE ELGIN, IL 60120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LINDSAY, MARTIN M 1400 TOASTMASTER DRIVE ELGIN, IL 60120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO FITZGERALD, TIM 1400 TOASTMASTER DRIVE ELGIN, IL 60120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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04/25/07-80065-005 150.00

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.

SIGNATURE: Martin Lindsay p6 4/9/07 (847) 741-3300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #