

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L95451

FILED  
Jan 04, 2011  
Secretary of State

**Entity Name:** DELI KING/LARRY'S DELI, INC.

**Current Principal Place of Business:**

4520 LAND O'LAKES BLVD  
LAND O' LAKES, FL 34639

**New Principal Place of Business:**

**Current Mailing Address:**

4520 LAND O'LAKES BLVD  
LAND O' LAKES, FL 34639

**New Mailing Address:**

**FEI Number:** 59-3029857

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, ALBERT C. JR. ESQ  
819 JACARANDA  
LARGO, FL 33730 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CASTRO, LAWRENCE R  
Address: 14704 LAKE MAGDELENE CIR  
City-St-Zip: TAMPA, FL 33618

Title: V  
Name: CASTRO, CHRISTOPHER R  
Address: 4407 ALLEN RD  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: V  
Name: ADKINS, MICHELLE M  
Address: 2550 LAKE ELLEN CIRCLE  
City-St-Zip: TAMPA, FL 33618

Title: V  
Name: ADKINS, THOMAS P  
Address: 2550 LAKE ELLEN CIRCLE  
City-St-Zip: TAMPA, FL 33618

I hereby 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 all other like empowered.

SIGNATURE: THOMAS ADKINS

VP

01/04/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date