

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001532

FILED
Apr 30, 2004
Secretary of State

Entity Name: MOS' GOURMET BAKERY & DELICATESAN, INC.

Current Principal Place of Business:

2705 MARTIN LUTHER KING BLVD
SUITE F
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

13808 CANDIDATE PLACE
TAMPA, FL 33613

New Mailing Address:

FEI Number: 59-3604854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, OLIVER
13808 CANDIDATE PLACE
TAMPA, FL 33613 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: PD () Delete
Name: LEWIS, OLIVER
Address: 13808 CANDIDATE PLACE
City-St-Zip: TAMPA, FL 33613

Title: VD () Delete
Name: LEWIS, SHARON L
Address: 13808 CANDIDATE PLACE
City-St-Zip: TAMPA, FL 33613

Title: TD () Delete
Name: LEWIS, OLIVER JR
Address: 13808 CANDIDATE PLACE
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: GAMBLE, HAROLD SR
Address: 3817 MILLER AVE
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: LEWIS, LEROY
Address: 17309 LYNNETTE DR
City-St-Zip: LUTZ, FL 33549

Title: D () Delete
Name: PATTON, MARY
Address: 12413 OAK CEDAR PL #4
City-St-Zip: TAMPA, FL 33612

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:

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 for the exemption stated in Section 119.07(3)(i), 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: OLIVER LEWIS

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date