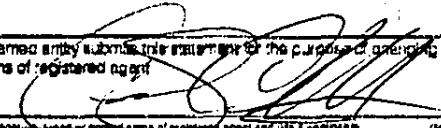
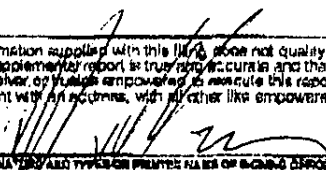


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000005278 1. Entity Name SPANKY'S OF WEST BROWARD, INC.			
Principal Place of Business 309 N STATE ROAD 7 MARGATE, FL 33063		Mailing Address 309 N STATE ROAD 7 MARGATE, FL 33063	
DO NOT WRITE IN THIS SPACE			
 05012008 No Chg-P CR2E034 (11/05)			
4. FEI Number 66-0960103		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CAFFRO, CRAIG 309 N STATE ROAD 7 MARGATE, FL 33063			
DO NOT WRITE IN THIS SPACE			
8. The above named entity submits this statement for the purpose of obtaining 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  Signature of space or provide name of registered agent and date of approval. (NOTE: Registered Agent signature required when filing.)		DATE 30 Apr 08	
FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$660.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P. PUSHINSKY, DONNA 309 N STATE ROAD 7 MARGATE, FL 33063		
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
DO NOT WRITE IN THIS SPACE			
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 307, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an authority, with all other like empowered.			
SIGNATURE:  Signature and typed or printed name of signing officer or director		DATE 30 Apr 08 Day of filing	

U00000948296
06/02/08-80048-025 150.00