### 2007 FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT # P01000035719

1. Entity Name

J & J FOOD SERVICE GROUP, INC.



Principal Place of Business

Mailing Address

50 INDIAN TRACE WESTON, FL 33326 50 INDIAN TRACE WESTON, FL 33326

#### FILED Feb 01, 2007 08:00 AM Secretary of State



#### DO NOT WRITE IN THIS SPACE

01232007 No Chg-P CR

CR2E034 (11/05)

4. FEI Number 65-1089645 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

GROSSMAN, DAN 9122 GRIFFIN RD COOPER CITY, FL 33328

# DO NOT WRITE IN THIS SPACE

signature, typed or puried name if registered agent and utile	if applicable (NOTE: Registered Agent signature required when reinstating)	1-24-07 DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	000000615399 02/06/07-80071-002 150.00
10. OFFICERS AND DIREC	CTORS	

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

10. OFFICERS AND DIRECTORS	
NAME PSTD FRIEDBERG, RICHARD STREET ADDRESS 10743 NW 55TH ST.	
CITY-ST-ZIP CORAL SPRINGS, FL 33076	
ITILE VD NAME FRIEDBERG, SHELLEY STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33076	
TITLE NAME STREET ADDRESS CITY-ST-2IP	
TITLE NAME STREET ADDRESS CITY-ST-2IP	
TITLE NAME STREET ADDRESS CITY-ST-2IP	
TITLE NAME STREET ADDRESS CITY- ST-ZIP	(-1

## 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICEROR DIRECTOR

1-24-07

Daytime Phone #