

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000070067

Entity Name: B.S. FOOD & GAS, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

5390 DUHME ROAD
SAINT PETERSBURG, FL 33708 US

New Principal Place of Business:

Current Mailing Address:

4707 WHITECLIFF PL
DOVER, FL 33527

New Mailing Address:

FEI Number: 59-3731795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUTHYSSERIL, BABY
4707 WHITECLIFF PL
DOVER, FL 33527 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: PUTHYSSERIL, BABY J
Address: 4707 WHITECLIFF PL
City-St-Zip: DOVER, FL 33527

Title: VD () Delete
Name: KAFALIMATTOM, SIBI
Address: 608 GLENDALE RD
City-St-Zip: GLENVIEW, IL 60025

Title: TD () Delete
Name: JAMES, BINNY
Address: 2238 GOLF MANOR BLVD
City-St-Zip: VALRICO, FL 33594

Title: SD () Delete
Name: MATHEW, MAGIE
Address: 7832 AMBER CT
City-St-Zip: SEMINOLE, FL 33772

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: SD (X) Change () Addition
Name: MATHEW, SAJI
Address: 7832 AMBER CT
City-St-Zip: SEMINOLE, FL 33772

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SAJI MATHEW

S

04/29/2008

Electronic Signature of Signing Officer or Director

Date