

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000038531

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: KITCHEN EXPRESSIONS, INC.

## Current Principal Place of Business:

17222 ALICO CENTER ROAD  
SUITE 5  
FORT MYERS, FL 33908

## New Principal Place of Business:

17222 ALICO CENTER ROAD  
SUITE 5  
FORT MYERS, FL 33967

## Current Mailing Address:

17222 ALICO CENTER ROAD  
SUITE 5  
FORT MYERS, FL 33908

## New Mailing Address:

17222 ALICO CENTER ROAD  
SUITE 5  
FORT MYERS, FL 33967

FEI Number: 03-0430220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PUSKAS, ROBYN  
17222 ALICO CENTER ROAD  
SUITE 5  
FORT MYERS, FL 33908 US

## Name and Address of New Registered Agent:

PUSKAS, ROBYN  
17222 ALICO CENTER ROAD  
SUITE 5  
FORT MYERS, FL 33967 US

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: ROBYN PUSKAS

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: PUSKAS, ROBYN  
Address: 17222 ALICO CENTER ROAD, SUITE 5  
City-St-Zip: FORT MYERS, FL 33908 US

Title: DVT ( ) Delete  
Name: PUSKAS, ATTILA  
Address: 17222 ALICO CENTER ROAD, SUITE 5  
City-St-Zip: FORT MYERS, FL 33908

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: PUSKAS, ROBYN  
Address: 17222 ALICO CENTER ROAD, SUITE 5  
City-St-Zip: FORT MYERS, FL 33967 US

Title: DVT (X) Change ( ) Addition  
Name: PUSKAS, ATTILA  
Address: 17222 ALICO CENTER ROAD, SUITE 5  
City-St-Zip: FORT MYERS, FL 33967

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: ROBYN PUSKAS

DPS

03/23/2009

Electronic Signature of Signing Officer or Director

Date