

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000002315

Entity Name: FARHATS PITA BAKERY, INC.

FILED  
May 08, 2007  
Secretary of State

## Current Principal Place of Business:

10371-7 OLD ST. AUGUSTINE ROAD  
7  
JACKSONVILLE, FL 32257

## New Principal Place of Business:

10391-7 OLD ST. AUGUSTINE ROAD  
JACKSONVILLE, FL 32257

## Current Mailing Address:

11677 FALLING LEAF TRAIL  
JACKSONVILLE,, FL 32258

## New Mailing Address:

FEI Number: 56-2311252

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIAL, RICHARD A JR.  
4251 UNIV. BLVD., S.  
SUITE 403  
JACKSONVILLE, FL 32216 US

## Name and Address of New Registered Agent:

FARHAT, JAMIL  
10391-7 OLD ST. AUGUSTINE ROAD  
JACKSONVILLE, FL 32257 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: JAMIL FARHAT

05/08/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete  
Name: FARHAT, JAMIL I  
Address: 11677 FALLING LEAF TRAIL  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP,D ( ) Delete  
Name: FARHAT, ISAM J  
Address: 11677 FALLING LEAF TRAIL  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP,D ( ) Delete  
Name: FARHAT, JEANETTE R  
Address: 11677 FALLING LEAF TRAIL  
City-St-Zip: JACKSONVILLE, FL 32258

## 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:

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: JAMIL FARHAT

P, D

05/08/2007

Electronic Signature of Signing Officer or Director

Date