

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000034398

FILED
Apr 30, 2008
Secretary of State

Entity Name: TAMPA BAY KITCHEN BROKERS, INC.

Current Principal Place of Business:

360 STRATHMORE AVE.
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

360 STRATHMORE AVE
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 73-1718498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALL FLORIDA FIRM INC
465 S VOLUSIA AVE
SUITE C
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

WARNER, CHRISTOPHER J PRES
360 STRATHMORE AVE
OLDSMAR, FL 34677 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: CHRISTOPHER J. WARNER

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WARNER, CHRISTOPHER J
Address: 360 STRATHMORE AVE.
City-St-Zip: OLDSMAR, FL 34677

Title: V () Delete
Name: WARNER, HELENE G
Address: 360 STRATHMORE AVE
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHRISTOPHER J. WARNER

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date