

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055135

FILED  
May 01, 2008  
Secretary of State

Entity Name: FROOTS FRANCHISING COMPANIES, INC.

**Current Principal Place of Business:**

9900 STIRLING ROAD  
SUITE 243  
COOPER CITY, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

9900 STIRLING ROAD  
SUITE 243  
COOPER CITY, FL 33024

**New Mailing Address:**

FEI Number: 45-0518498      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOPEZ, DAVID A  
3601 NW 97 AVE  
COOPER CITY, FL 33024      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

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: PD ( ) Delete  
Name: CAVALLO, CHRISTOPHER M  
Address: 3201 NE 183RD STREET, APT 408  
City-St-Zip: AVENTURA, FL 33160

Title: VD (X) Delete  
Name: LOPEZ, DAVID A  
Address: 3601 NW 97 AVE  
City-St-Zip: COOPER CITY, FL 33024

Title: STD (X) Delete  
Name: BODNAR, STEPHEN  
Address: 5110 SW 89 TERR  
City-St-Zip: COOPER CITY, FL 33328

Title: D (X) Delete  
Name: CAVALLO, STEFAN A  
Address: 139 E. 95 STREET  
City-St-Zip: NEW YORK, NY 10128

Title: D (X) Delete  
Name: STEPHEN J CAVALLO,  
Address: 127 E 90TH STREET  
City-St-Zip: NEW YORK, NY 10128

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: LOPEZ, DAVID A  
Address: 3601 NW 97 AVE  
City-St-Zip: COOPER CITY, FL 33024

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: ( ) 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: DAVID LOPEZ

Electronic Signature of Signing Officer or Director

PRES

05/01/2008

\_\_\_\_\_ Date