2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055135

Entity Name: FROOTS FRANCHISING COMPANIES, INC.

FILED May 01, 2008 Secretary of State

Current Br	incinal Place	of Business	Now Princ	inal Bloop of Business		
Current Principal Place of Business:			New Finc	ipal Place of Business:		
9900 STIRL SUITE 243 COOPER C	ING ROAD DITY, FL 33024					
Current Mailing Address:			New Mailir	New Mailing Address:		
9900 STIRL SUITE 243 COOPER C	ING ROAD CITY, FL 33024					
FEI Number:	45-0518498	FEI Number Applied For () FE	l Number Not Appli	icable () Certificate of Status Desired ()		
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:		
LOPEZ, DA 3601 NW 9 COOPER C		US				
The above in the State		ubmits this statement for the purpo	se of changing it	ts registered office or registered agent, or both,		
SIGNATUR	E:					
	Electronic	Signature of Registered Agent		Date		
		(2)(b), F.S., the corporation did not rece Trust Fund Contribution().	eive the prior notice	е.		
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CAVALLO, CHRI	STREET, APT 408	Title: Name: Address: City-St-Zip:	PRES (X) Change () Addition LOPEZ, DAVID A 3601 NW 97 AVE COOPER CITY, FL 33024		
Title: Name: Address: City-St-Zip:	VD (X) I LOPEZ, DAVID A 3601 NW 97 AVE COOPER CITY, I	<u> </u>	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	STD (X) I BODNAR, STEPI 5110 SW 89 TEP COOPER CITY, I	RR	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (X) I CAVALLO, STEF 139 E. 95 STREE NEW YORK, NY	ET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (X) I STEPHEN J CAV 127 E 90TH STR NEW YORK, NY	EET	Title: Name: Address: City-St-Zip:	() Change () Addition		

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 PRES 05/01/2008	
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