

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 05, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000068808

1. Entry Name
GARY'S FLAMIN' GRILL, INC.



Principal Place of Business
1377 BRICKYARD RD, STE 3
CHIPLEY, FL 32428

Mailing Address
1377 BRICKYARD RD, STE 3
CHIPLEY, FL 32428



08162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2372862

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ODOM, KRISTI M
1314 JACKSON AVE
CHIPLEY, FL 32428

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

000000773230
09/05/07-800002-019 550.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
ABBOTT, GARY
1846 ROSEWOOD DR
CHIPLEY, FL 32428

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
TRAWICK, CARLOS
1839 SWEET BAY RD.
CHIPLEY, FL 32428

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
ABBOTT, TAMMY
1846 ROSEWOOD DR
CHIPLEY, FL 32428

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gary Abbott
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-23-07

Date

850 638-8188

Daytime Phone #