

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000076269

1. Entity Name

SOUP KETTLE, INC.



Principal Place of Business

4065 N. HAVERHILL RD.
SUITE B-5
WEST PALM BEACH, FL 33417

Mailing Address

4065 N. HAVERHILL RD.
SUITE B-5
WEST PALM BEACH, FL 33417



03202008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

30-0196043

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WAGNER, BRIAN D
1263 OLYMPIC CIRCLE
WEST PALM BEACH, FL 33413

**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 \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

U000000899307
04/28/08-80034-001 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WAGNER, BRIAN D
STREET ADDRESS 1263 OLYMPIC CIRCLE
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE STD
NAME WAGNER, TIFFANY S
STREET ADDRESS 1263 OLYMPIC CIRCLE
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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:

Tiffany Wagner Tiffany Wagner

3/31/08

(561) 966-9667

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #