2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109122

FILED Apr 27, 2005 Secretary of State

Entity Name: GRAM'S KITCHEN, INC. **Current Principal Place of Business: New Principal Place of Business:** 844 EAST NEW YORK AVENUE DELAND, FL 32724 **Current Mailing Address: New Mailing Address:** 694 BLAVK IRONWWOD DR 694 BLACK IRONWWOD DR DELAND, FL 32724 DELAND, FL 32724 FEI Number: 57-1190858 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HANSON, GREGORY N 694 BLACK IRONWOOD DRIVE DELAND, FL 32724 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HANSON, GREGORY N Name: Name: 694 BLACK IRONWOOD DRIVE Address: Address: City-St-Zip: DELAND, FL 32724 City-St-Zip: Title: SVD () Delete Title: () Change () Addition HANSON, VICKI A Name: Name: 694 BLACK IRONWOOD DRIVE Address: Address: DELAND, FL 32724 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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: GREGORY N HANSON PD 04/27/2005