

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000144459

Entity Name: SOUTHERN PRO KITCHENS, INC.

FILED
May 19, 2009
Secretary of State

Current Principal Place of Business:

7519 US HIGHWAY 98 SOUTH
DADE CITY, FL 33525

New Principal Place of Business:

Current Mailing Address:

7519 US HIGHWAY 98 SOUTH
KATHLEEN, FL 33849

New Mailing Address:

FEI Number: 20-0505555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTON, JULIE CPA
14144 6TH STREET
DADE CITY, FL 33525 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: PS () Delete
Name: PAUL, JOSEPH J
Address: 7519 US HIGHWAY 98 SOUTH
City-St-Zip: KATHLEEN, FL 33849

Title: VT () Delete
Name: PAUL, TRACEY A
Address: 7519 US HIGHWAY 98 SOUTH
City-St-Zip: KATHLEEN, FL 33849

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TRACEY PAUL

VT

05/19/2009

Electronic Signature of Signing Officer or Director

Date