2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P04000057082 1. Entity Name MUNCHEE'S EXPRESS, INC.

FILED Apr 18, 2007 8:00 am Secretary of State

04-18-2007 90157 003 ***150.00



Principal Place of Business

614 UNION STREET DUNEDIN, FL 34698 Mailing Address

614 UNION STREET DUNEDIN, FL 34698

US



CR2E034 (11/05) 04122007 No Chg-P

DO NOT WRITE IN THIS SPACE

4. FEI Number	T	Applied For
20-0947561		Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MSAWELL, MAH'D **614 UNION STREET** DUNEDIN, FL 34698

SIGNATURE:

DO NOT WRITE IN THIS SPACE

4-13-07

727-481-9176

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. If am familiar with, and accept the obligations of registered agent.							
. CIONATURE							
SIGNATURE Signature, typed or printed name of registered agent and title il applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Trust Fund Contrib	~ ~~~	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDTS MSAWELL, MAH'D 614 UNION STREET DUNEDIN, FL 34698						
TITLE NAME STREET ADDRESS CITY+ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		•		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY+ST-ZIP	; ;			IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADORESS CITY-ST-ZIP							
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR