

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000068778

FILED
Apr 28, 2005
Secretary of State

Entity Name: SWEENEY TODD COLD CUTS CORP.

Current Principal Place of Business:

1012 PINE BRANCH CT
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1012 PINE BRANCH CT
WESTON, FL 33326

New Mailing Address:

FEI Number: 20-1174392 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LAZARUS, BRUCE
1012 PINE BRANCH CT
WESTON, FL 33326 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Change (X) Addition
Name: LAZARUS, BRUCE
Address: 1012 PINE BRANCH CT
City-St-Zip: WESTON, FL 33326 US

Title: VPSD () Change (X) Addition
Name: LAZARUS, LAURA
Address: 1012 PINE BRANCH CT
City-St-Zip: WESTON, FL 33326 US

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 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: BRUCE LAZARUS

P

04/28/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date