## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **ANNUAL REPORT** Jan 29, 2007 08:00 AM DOCUMENT # P04000091787 **Secretary of State** 1. Entity Name FRESH PEEL, INC. Principal Place of Business Mailing Address 14848 SOUTHWEST 148TH STREET CIRCLE 14848 SOUTHWEST 148TH STREET CIRCLE MIAMI, FL 33196 MIAMI, FL 33196 01042007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1191652 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. DO NOT WRITE 1840 SW 22ND ST. 4TH FLOOR IN THIS SPACE MIAMI, FL 33145 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 il applicable (NOTE, Registered Agent signature required when reinstating) <del>unonen608</del>625 02/01/07-80017-020 1\$0 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE HAYDEN, JOSEPH NAME 14848 SOUTHWEST 148TH STREET CIRCLE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33196 VSTD TITLE NAME HAYDEN, DEBORAH STREET ADDRESS 14848 SOUTHWEST 148TH STREET CIRCLE CITY-ST-ZIP MIAMI, FL. 33196 TITLE HAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET AUDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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

**FILED**