2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000107288

Entity Name: BASIL'S GOURMET ITALIAN DELI INC.

FILED May 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6141 W. CRYSTAL OAKS DRIVE 9824 U.S. HIGHWAY 19 LECANTO, FL 34461 PORT RICHEY, FL 34668

Current Mailing Address: New Mailing Address:

6141 W. CRYSTAL OAKS DRIVE 9824 U.S. HIGHWAY 19 LECANTO, FL 34461 PORT RICHEY, FL 34668

FEI Number: 20-1387792 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:

DECUIR, CAREN
6141 W. CRYSTAL OAKS DRIVE
414 LECANTO, FL 34461 US
514 DECUIR, CAREN
514 US 9824 U.S. HIGHWAY 19
515 PORT RICHEY, FL 34668 US

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: CAREN DECUIR 05/17/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 EVERNHAM, RICHARD
 Name:
 EVERNHAM, RICHARD

 Address:
 6141 W. CRYSTAL OAKS DRIVE
 Address:
 9824 U.S. HIGHWAY 19

 City-St-Zip:
 LECANTO, FL 34461
 City-St-Zip:
 PORT RICHEY, FL 34668

Title: D () Delete Title: DP (X) Change () Addition

 Name:
 DECUIR, CAREN
 Name:
 DECUIR, CAREN

 Address:
 6141 W. CRYSTAL OAKS DRIVE
 Address:
 9824 U.S. HIGHWAY 19

 City-St-Zip:
 LECANTO, FL 34461
 City-St-Zip:
 PORT RICHEY, FL 34668

I hereby certify that the information supplied with this filing does not qualify for the 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: CAREN DECUIR P 05/17/2006