


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # P05000094841 1. Entity Name PEPPER TREE SANDWICH SHOPPE, INC.	
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Principal Place of Business 2672 PALM BAY ROAD, NE PALM BAY, FL 32905	Mailing Address 2672 PALM BAY ROAD, NE PALM BAY, FL 32905
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DO NOT WRITE IN THIS SPACE



01072008 No Chg-P CR2E034(11/05)

4. FEI Number 20-3157484	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CORAM, ANGELA M 2672 PALM BAY RD NE PALM BAY, FL 32905

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD CORAM, ANGELA M POST OFFICE BOX 61080 PALM BAY, FL 32906
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CORAM, DON M POST OFFICE BOX 61080 PALM BAY, FL 32906
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<p>000000995775 04/24/08-80081-009 150.00</p> DO NOT WRITE IN THIS SPACE

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: Angela Coram Angela Coram 04/10/08 321-724-8800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #