2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000075201

Entity Name: SUDDEN CRAVE, INC

Apr 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6843 ST. AUGUSTINE RD JACKSONVILLE, FL 32217 **New Mailing Address: Current Mailing Address:** 6843 ST. AUGUSTINE RD JACKSONVILLE, FL 32217 US FEI Number: 20-4965314 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: MAM, BUNNY 1411 INWOOD TERRACE US JACKSONVILLE, FL 32207 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Address:

City-St-Zip:

Title: PTD () Delete Title: (X) Change () Addition MAM, BUNNY Name: Name: MAM, BUNNY 1411 INWOOD TERRACE 428 E. KESLEY LN Address: Address:

City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip:

JACKSONVILLE, FL 32259 US

Title: VPSD Title: () Change () Addition () Delete Name:

MAM. MOEUN Name: 4481 SUMMER HAVEN BLVD S Address: JACKSONVILLE, FL 32258 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BUNNY MAM **PRES** 04/25/2009