

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000100136

Entity Name: THE PITA PRO'S, INC

FILED
Feb 13, 2007
Secretary of State

Current Principal Place of Business:

5315 SW 25TH PL
CAPE CORAL, FL 33914

New Principal Place of Business:

9918 GULF COAST MAIN ST
M-7
FORT MYERS, FL 33913

Current Mailing Address:

5315 SW 25TH PL
CAPE CORAL, FL 33914

New Mailing Address:

FEI Number: 20-5295066

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OBRIEN, JUSTIN D
5315 SW 25TH PL
CAPE CORAL, FL 33914 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: P () Delete
Name: OBRIEN, JUSTIN D
Address: 5315 SW 25TH PL
City-St-Zip: CAPE CORAL, FL 33914

Title: VP () Delete
Name: GOFF, TIMOTHY A
Address: 1009 SE 16TH ST
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GOFF, TIMOTHY A
Address: 5430 SW 24TH PL
City-St-Zip: CAPE CORAL, FL 33914

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: JUSTIN OBRIEN

P

02/13/2007

Electronic Signature of Signing Officer or Director

Date