

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000107675					
1. Entity Name KOSHER CREAM CORP.					
Principal Place of Business 8225 NATURES WAY SUITE 119 BRADENTON, FL 34202 US			Mailing Address 22515 MORNING GLORY CIR BRADENTON, FL 34202 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 8225 Natures Way			
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 119			
City & State		City & State Bradenton, FL			
Zip	Country	Zip 34202	Country Manatee	4. FEI Number	
6. Name and Address of Current Registered Agent CHARLES A. GIERHART, P.A. 100 WALLACE AVE SUITE 260 SARASOTA, FL 34237				7. Name and Address of New Registered Agent	
Name				Name	
Street Address (P.O. Box Number is Not Acceptable)				Street Address (P.O. Box Number is Not Acceptable)	
City				City	
FL				Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P	NAME GOIN, BRIAN D		TITLE	NAME	
STREET ADDRESS 22515 MORNING GLORY CIR	CITY - ST - ZIP BRADENTON, FL 34202		STREET ADDRESS	CITY - ST - ZIP	
TITLE VPS	NAME GOIN, TONI D		TITLE	NAME	
STREET ADDRESS 22515 MORNING GLORY CIR	CITY - ST - ZIP BRADENTON, FL 34202		STREET ADDRESS	CITY - ST - ZIP	
TITLE	NAME		TITLE	NAME	
STREET ADDRESS	CITY - ST - ZIP		STREET ADDRESS	CITY - ST - ZIP	
TITLE	NAME		TITLE	NAME	
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TITLE	NAME		TITLE	NAME	
STREET ADDRESS	CITY - ST - ZIP		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: <u>Brian Goin</u>			8/13/07		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

FILED

07/16/07 07 AUG 20 PM 17
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



08142007 Chg-P CR2E034 (12/06)

4. FEI Number ☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

900108705009
 08/28/07--01035--001 **103.75

8/13/07

Doc # P06000107675

Kosher Cream Corp —

enclosed is —

Check # 1124 for \$103.75

balance due for annual report 2007

paid 8/1/07 \$55.00

Thank you

Brian Goin

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(941) 907 8484