


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90196 005 ***150.00

DOCUMENT # P06000143682	
1. Entity Name 49TH STREET DONUTS, INC.	

Principal Place of Business 2551 GULF TO BAY BOULEVARD CLEARWATER, FL 33765	Mailing Address 2551 GULF TO BAY BOULEVARD CLEARWATER, FL 33765
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2. Principal Place of Business - No P.O. Box # 12550 49th STREET	3. Mailing Address Suite, Apt. #, etc.
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City & State PINELLAS PARK FLORIDA	City & State
Zip 33760	Country U.S.A

04042007 Chg-P CR2E034 (12/06)

4. FEI Number 20-5853222	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145	
7. Name and Address of New Registered Agent Name VIKALP PATEL Street Address (P.O. Box Number is Not Acceptable) 2551 GULF TO BAY BLVD City CLEARWATER FL Zip Code 33765	

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 _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD PATEL, VIKALP 2551 GULF TO BAY BOULEVARD CLEARWATER, FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD MEHTA, NIRAV 2551 GULF TO BAY BOULEVARD CLEARWATER, FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 similar empowered.

SIGNATURE:  **VIKALP PATEL** 4/12/07 727-725-SDZO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #