

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000144622

Entity Name: SMASHING PANS, INC

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

5391 JULINGTON CREEK ROAD
JACKSONVILLE, FL 32258

New Principal Place of Business:

Current Mailing Address:

5391 JULINGTON CREEK ROAD
JACKSONVILLE, FL 32258

New Mailing Address:

FEI Number: 20-5897612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORSE, MARK T
5391 JULINGTON CREEK ROAD
JACKSONVILLE, FL 32258 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: CEO () Delete
Name: MORSE, MARK T
Address: 5391 JULINGTON CREEK ROAD
City-St-Zip: JACKSONVILLE, FL 32258

Title: CEO () Delete
Name: TRIPI, JENNIFER
Address: 440 CRESCENT BLVD
City-St-Zip: ST. AUGUSTINE, FL 32095

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CEO (X) Change () Addition
Name: TRIPI, JENNIFER
Address: 166 SUNSET CIRCLE NORTH
City-St-Zip: ST. AUGUSTINE, FL 32080

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: MARK MORSE

CEO

04/25/2008

Electronic Signature of Signing Officer or Director

Date