2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 26, 2008 8:00 am
Secretary of State
05-14-2008 90012 011 ***150.00

DOCUMENT # P07000019306

1. Entity Name
V & G FOOD SERVICES, INC.

Principal Place of Business	Mailing Address
10931 US HWY 1 PORT SAINT LUCIE FL 34952	10931 US HWY 1 PORT SAINT LUCIE FL 34952

1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 20-8453796 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DESHLER, JOHN F
638 SE EVERGREEN TERRACE
PORT SAINT LUCIE FL 34984

7. Name and Address of New Registered Agent

Name Vito Bitetto
Street Address (P.O. Box Number is Not Acceptable)
1484 SE Village Green Dr
City Port St. Lucie FL Zip Code 34952

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 Vito Bitetto 6/23/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD BITETTO, VITANGELO R 1842 SE FLORESTA DRIVE PORT SAINT LUCIE FL 34983	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DESHLER, JOHN F 638 SE EVERGREEN TERRACE PORT SAINT LUCIE FL 34983	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP VITCHERFOSK, ANTHONY 770 CYPRESS STREET PORT SAINT LUCIE FL 34952	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S James Illiano 1842 SE Floresta Dr Port SAINT LUCIE, FL 34983	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Telesco, Anthony 770 Cypress St. Port St. Lucie, FL 34952	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 any address, with all other like empowered.

SIGNATURE: Vito Bitetto 6/23/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #