

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000030978

FILED
Feb 04, 2008
Secretary of State

Entity Name: VICTOR PHILLIPS CHEF SERVICES, INC.

Current Principal Place of Business:

9066 127TH LANE N
SEMINOLE, FL 33776

New Principal Place of Business:

4501 107TH CIRCLE NORTH
CLEARWATER, FL 33762

Current Mailing Address:

9066 127TH LANE N
SEMINOLE, FL 33776

New Mailing Address:

FEI Number: 20-8692294 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HLAVACKA, JOSEPH V
9066 127TH LANE N
SEMINOLE, FL 33776 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: CO () Delete
Name: HLAVACKA, JOSEPH V
Address: 9066 127TH LANE N
City-St-Zip: SEMINOLE, FL 33776

Title: CO () Delete
Name: COMUNALE, GEORGE P
Address: 556 CIRCLE DR
City-St-Zip: W LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CO (X) Change () Addition
Name: HLAVACKA, MARY E
Address: 9066 127TH LANE N
City-St-Zip: SEMINOLE, FL 33776

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: JOSEPH V HLAVACKA

CO

02/04/2008

Electronic Signature of Signing Officer or Director

_____ Date