

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000036750

Entity Name: FALAFEL BISTRO, INC.

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

11570 WILES RD #6  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

5677 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076

**Current Mailing Address:**

11570 WILES RD #6  
CORAL SPRINGS, FL 33076

**New Mailing Address:**

5677 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076

FEI Number: 20-8742462

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COHEN, ILAN  
5538 NW 123RD WAY  
CORAL SPRINGS, FL 33076 US

**Name and Address of New Registered Agent:**

COHEN, ILAN  
11326 NW 65TH MANOR  
PARKLAND, FL 33076 US

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: ILAN COHEN

02/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: OWNE  
Name: COHEN, ILAN  
Address: 11326 NW 65TH MANOR  
City-St-Zip: PARKLAND, FL 33076

I hereby 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 all other like empowered.

SIGNATURE: ILAN COHEN

OWNE

02/18/2011

Electronic Signature of Signing Officer or Director

Date