2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000071246

Address:

City-St-Zip:

Entity Name: MR. B'S GREAT FOOD, INC.

FILED Apr 28, 2008 Secretary of State

and with the bo	, O(L) (1 1 00B, 11 VO.				
Current Principal Place of Business:		New Prince	New Principal Place of Business:		
440 WESLEY RD GREEN COVE SPRINGS, FL 32043			1691 RUSSELL ROAD MIDDLEBURG, FL 32068		
Current Mailing Address:		New Maili	New Mailing Address:		
440 WESLEY RD GREEN COVE SPRING	GS, FL 32043				
FEI Number: 26-0384095 FEI Number Applied For () FEI Nu		FEI Number Not Appl	mber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
PITTS, LARRY 440 WESLEY RD GREEN COVE SPRING	GS, FL 32043 US				
The above named entity in the State of Florida.	y submits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATURE:					
Electro	onic Signature of Registered Age	ent		Date	
Election Campaign Financi	ing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: (Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	PITTS, LARF 440 WESLE		
Title: (() Delete	Title: Name:	VP WARNER, R	() Change (X) Addition ONALD H	

Address:

City-St-Zip:

1691 RUSSELL ROAD MIDDLEBURG, FL 32068

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: LARRY M. PITTS PRES 04/28/2008