2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000085088

Entity Name: C&S WEST INDIAN GROCERIES & TAKEOUT INC

FILED Apr 30, 2009 Secretary of State

Littly Nam	ie. Cas wes	T INDIAN GROCERIES & TA	INECOT II	NO.		
Current Principal Place of Business:				New Principal Place	of Business:	
	TH WEST 67 ST RANCHES					
Current Mailing Address:				New Mailing Address:		
		PLACE18450 PINES BLVD 1BROKE PINES, FL 33331				
FEI Number: 4	45-0567831	FEI Number Applied For ()	FEI Nun	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
NELSON, YVONNE 16650 SW 67 PL SW RANCHES, FL 33331 US				PITTER, CARL S 7447 NORTH WEST 5 TAMARAC, FL 33319		
The above r		ubmits this statement for the p	ourpose o	f changing its registered	d office or registered agent, or both,	
SIGNATURE: CARL S PITTER				04/30/2009		
	Electroni	c Signature of Registered Age	ent		Date	
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Address:	P () NELSON, YVON 16650 SW 67 P SW RANCHES,	-		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () NELSON, LENFO 16650 SW 67 P SW RANCHES,	-		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: YVONNE NELSON P 04/30/2009