## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 23, 2008 8:00 am Secretary of State

PROCESS PRICE OF Control STREET UNIT 3. BUTCHOR 3 BUNNELL, FL 32110  2. Principal Prace of Burness - No P.O. Box # 3. Mining Address SUNNEL, FL 32110  2. Principal Prace of Burness - No P.O. Box # 3. Mining Address SUNNEL, FL 32110  2. Principal Prace of Burness - No P.O. Box # 3. Mining Address SUNNEL, FL 32110  2. Principal Prace of Burness - No P.O. Box # 3. Mining Address SUNNEL, FL 32110  2. Principal Prace of Burness - No P.O. Box # 3. Mining Address SUNNEL, FL 32110  2. Principal Prace of Burness - No P.O. Box # 3. Mining Address SUNNEL, FL 32100  2. Principal Prace of Burness - No P.O. Box # 3. Mining Address SUNNEL, FL 32100  3. Name and Address of Current Registered Agent Properties of Sunnel Debted State Debted State Debted Properties Agent Propertie	DOCUMENT # P0700090011  1. Entity Name SWEETIE'S ICE CREAM PARLOR AND SANDWICH SHOPPE, INC.							04-23-2008	3 90020 042 ***1		
TOO S STATE STREET UNIT 3. BILDINGS BUNNELL, FL 32110  2. Principal Place of Bunness - No P.O. Box #   3. Malinny Address Sulks, Apr. # etc.   04172008   Chg. P.   CR2604 (12/06)  City & State   Christopher   Chr	Principal Place of Business Mailing Address					-L	1	,			
Suite, Apt. 4, etc.    Suite, Apt. 4, etc.   O4172008   ChgP   CR2634 (12/05)	700 S. STATE STREET UNIT 3, BUILDING 3			700 S. STATE STREET UNIT 3, BUILDING 3				- Barii fabii bain baik gair	T BBYID (PIN DBYI BBID)	10/07/1 <b>/</b> 1 /00/	
City & State  Country  2 p  Country  5. Centricate of Status Desired   S8.175 Additional Fee Required  5. Name and Address of Current Registered Agent  7. Name and Address of Status Desired   S8.175 Additional Fee Required  1. Name  1. Name  1. Name  1. Name and Address of Status Desired   S8.175 Additional Fee Required  1. Name and Address of New Registered Agent  7. Name and Address	Principal Place of Business - No P.O. Box #     3. Mailing Address										
S. Name and Address of Gurrent Registered Agent  9. Name and Address of Current Registered Agent  7. Name and Address of Name Registered Agent  7. Name and Address of Name Registered Agent  8. The Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City FL 20 Code  8. The above names entity submits this statement for the purpose of changing its registered agent, or both in the State of Forida. I am familiar with, and accept the obligations of registered agent, or both in the State of Forida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  FELL NOWILI FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  Defices AND DIRECTORS  11. ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  P.D. DEFICERS AND DIRECTORS  11. ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  THE VPTS  PALM COAST, FL 32137  THE VPTS  PALM COAST, FL 32137  THE VPTS  PALM COAST, FL 32137  THE NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1)  NAME  SIRET	Suite, Apt. #, etc.			Suite, Apt. #, etc.					CR2E034 (12/06)	1	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. The above name entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Forda. I am lamiliar with, and accept the obligations of registered agent, or both in the State of Forda. I am lamiliar with, and accept the obligations of registered agent.  8. The above name entity submits his statement for the purpose of changing its registered office or registered agent, or both in the State of Forda. I am lamiliar with, and accept the obligations of registered agent.  8. The above name entity submits his statement for the purpose of changing its registered office or registered agent, or both in the State of Forda. I am lamiliar with, and accept the obligations of registered agent, or both in the State of Forda. I am lamiliar with, and accept the obligations of registered agent, or both in the State of Forda. I am lamiliar with, and accept the obligations of registered agent, or both in the State of Forda. I am lamiliar with, and accept the obligations of registered agent, or both in the State of Forda. I am lamiliar with, and accept the obligations of registered agent, or both in the State of Forda. I am lamiliar with, and accept the obligations of registered agent, or both in the State of Forda. I am lamiliar with, and accept the or registered agent, or both in the State of Forda. I am lamiliar with, and accept the obligations of registered agent, or both in the State of Forda. I am lamiliar with, and accept the or registered agent, or both in the State of Forda. I am lamiliar with, and accept the notions of registered agent, or both in the State of Forda. I am lamiliar with, and accept the notions of registered agent, or both in the State of Forda. I am lamiliar with, and accept the notions of registered agent, or both in the State of Forda. I am lamiliar with, and accept the notions of registered agent, or both in the State of Forda. I am lamiliar with, an	,	8		City & State			4. FEI Number 26 – 07	40139	<del> </del>		
Asing ALLETTA*:JOHN J.R 5431 A.J SOUTH SUITE 101 ST. AUGUSTINE, FL 32080  City FL Zip Code  City FL Zi	Zip.		Country	Zip Cour		ntry	5. Certificate	of Status Desired			
GALLETTA: JOHN JR S431 A1A SOUTH SUTTE 101 ST. AUGUSTINE, FL 32080  City FL Zip Code  6. The above named early submits this statement for the purpose of changing as registered office or registered agent, or both, in the State of Florids. Tan lamiliar with, and accept the inclinitation of registered agent.  SIGNATURE:    City FL   Zip Code			and Address of Current	Registered Agent			7. Name and	Address of New R	egistered Agent		
City FL Zip Code  5. The above names analy 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:  City FL Zip Code  City St.	GALLETTA JOHN JR. 5431 A1A SOUTH SUITE 101										
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.    SIGNAT (THE	;	, , , , , , , , , , , , , , , , , , ,	**			City			Zip Co	de	
SIGNATURE  Signature. Typed or ported name of Impatriced agent and life if addication.  PILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will ib a \$550.00  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  ITILE P.D. BENTON, MARY  SIRE! AUDRESS  CITY-S1-2P  PALM COAST, FL 32137  ITILE VPTS  CAMPBELL SUSAN  SIRE! AUDRESS  CITY-S1-2P  BUNNELL, FL 32110  Delete  ITILE  MAKE  SIRE! AUDRESS  CITY-S1-2P  BUNNELL, FL 32110  Delete  ITILE  MAKE  SIRE! AUDRESS  CITY-S1-2P  BUNNELL, FL 32110  Delete  ITILE  MAKE  SIRE! AUDRESS  CITY-S1-2P  BUNNELL, FL 32110  Delete  ITILE  MAKE  SIRE! AUDRESS  CITY-S1-2P  BUNNELL, FL 32110  Delete  ITILE  MAKE  SIRE! AUDRESS  CITY-S1-2P  BUNNELL, FL 32110  Delete  ITILE  MAKE  SIRE! AUDRESS  CITY-S1-2P  BUNNELL, FL 32110  Delete  ITILE  MAKE  SIRE! AUDRESS  CITY-S1-2P  BUNNELL, FL 32110  Delete  ITILE  MAKE  SIRE! AUDRESS  CITY-S1-2P  TITLE  MAKE  SIRE! AUDRESS  CITY-S1-2P  TITLE	The above named entity submits this statement for the nursose of changing its registration.					red office or register	red agent, or bot	h, in the State of Flo		, and accept	
### Change   Date   Change   C											
After May 1, 2008 Fee will be \$550.00  Trust Fund Contribution.   Added to Fees  10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  INIT.   P.D   MARY	SIGNATÜRE	Signature, typed	for printed name of registered agent	and title if applicable. (NO	ed Agent signature required	i when reinstating)		DATE			
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STREET ADDRESS CITY-S1-ZIP  TITLE NAME STREET ADDRESS CITY-S1-ZIP  12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 an address, with all other like empowered.  SIGNATURE:  SIGNATURE:  Addition  Ad									☐ Change	Addition	
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SIGNATURE: Vara Cauple 4/21/08	12. I hereby of indicated of the core	t on this repo rporation or t	ort or supplemental report is the receiver or trustee emp	s true and accurate and that owered to execute this repor	my signa t as requ	ature shall have the	same legal effec	t as if made under d	oath; that I am an office	er or director	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #	SIGNAT	URE: _	SIGNATURE AND THE CO	aughel	0 00 000	TOB		4/21/0 g	Day⊭me Phone #		