

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000105932

Entity Name: VEGGIE MAGIC INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

4490 RIVERWOOD AVE
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

4490 RIVERWOOD AVE
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 26-1125331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POPLAWSKI, EVONA
4490 RIVERWOOD AVE
SARASOTA, FL 34231 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: PVST () Delete
Name: POPLAWSKI, EVONA
Address: 4490 RIVERWOOD AVE
City-St-Zip: SARASOTA, FL 34231 US

Title: D () Delete
Name: POPLAWSKI, EVONA
Address: 4490 RIVERWOOD AVE
City-St-Zip: SARASOTA, FL 34231 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCT (X) Change () Addition
Name: POPLAWSKI, EVONA
Address: 4490 RIVERWOOD AVE
City-St-Zip: SARASOTA, FL 34231 US

Title: PDS (X) Change () Addition
Name: NORWOOD, JENNA
Address: P.O. BOX 546
City-St-Zip: SARASOTA, FL 34230 US

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: EVONA POPLAWSKI

DCT

04/28/2008

Electronic Signature of Signing Officer or Director

Date