

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000110196

Entity Name: THE CUPCAKE SPOT, INC.

FILED  
Apr 28, 2008  
Secretary of State

## Current Principal Place of Business:

2813 W. SAN ISIDRO STREET  
TAMPA, FL 33629

## New Principal Place of Business:

2401 S. DALE MABRY BLVD  
TAMPA, FL 33629

## Current Mailing Address:

2813 W. SAN ISIDRO STREET  
TAMPA, FL 33629

## New Mailing Address:

FEI Number: 45-0578332      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROGERS, NICOLE  
2813 W. SAN ISIDRO STREET  
TAMPA, FL 33629      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: PRES ( ) Delete  
Name: ROGERS, NICOLE  
Address: 2813 W. SAN ISIDRO STREET  
City-St-Zip: TAMPA, FL 33629

Title: TRES ( ) Delete  
Name: ROGERS, NICOLE  
Address: 2813 W. SAN ISIDRO STREET  
City-St-Zip: TAMPA, FL 33629

Title: SECT ( ) Delete  
Name: ROGERS, NICOLE  
Address: 2813 W. SAN ISIDRO STREET  
City-St-Zip: TAMPA, FL 33629

Title: DIR ( ) Delete  
Name: ROGERS, NICOLE  
Address: 2813 W. SAN ISIDRO STREET  
City-St-Zip: TAMPA, FL 33629

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: NICOLE ROGERS

PRES

04/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date