

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000122514

Entity Name: ALL WAYS COOKING, INC.

**FILED**  
**Apr 21, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

919 HILLCREST DRIVE  
BLDG. 20 APT. #815  
HOLLYWOOD, FL 33021 US

**New Principal Place of Business:**

**Current Mailing Address:**

919 HILLCREST DRIVE  
BLDG. 20 APT. #815  
HOLLYWOOD, FL 33021 US

**New Mailing Address:**

FEI Number: 26-1390474

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TIGERO, SONIA  
919 HILLCREST DRIVE  
BLDG. 20 APT. #815  
HOLLYWOOD, FL 33021 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TIGERO, SONIA  
Address: 919 HILLCREST DRIVE BLDG. 20 APT. #815  
City-St-Zip: HOLLYWOOD, FL 33021 US

I hereby 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 all other like empowered.

SIGNATURE: SONIA TIGERO

P

04/21/2012

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

\_\_\_\_\_  
Date