

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000052135

FILED  
Aug 09, 2009  
Secretary of State

Entity Name: SINFULLY DELICIOUS DESSERTS INC.

## Current Principal Place of Business:

4784 SIMCOE ST.  
PALM HARBOR, FL 34683

## New Principal Place of Business:

131 ATHENIAN WAY  
TARPON SPRINGS, FL 34689

## Current Mailing Address:

4784 SIMCOE ST.  
PALM HARBOR, FL 34683

## New Mailing Address:

PO BOX 923  
PALM HARBOR, FL 34682

FEI Number: 22-3979764

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: FORRESTER, BARBARA  
Address: 4784 SIMCOE ST.  
City-St-Zip: PALM HARBOR, FL 34683

Title: DVS ( ) Delete  
Name: FOISY, RUSSELL  
Address: 4784 SIMCOE ST.  
City-St-Zip: PALM HARBOR, FL 34683

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: FORRESTER, BARBARA  
Address: 131 ATHENIAN WAY  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: DVS (X) Change ( ) Addition  
Name: FOISY, RUSSELL  
Address: 131 ATHENIAN WAY  
City-St-Zip: TARPON SPRINGS, FL 34689

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: BARBARA FORRESTER

PRES

08/09/2009

Electronic Signature of Signing Officer or Director

Date