

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000079898

Entity Name: BOSS HOGS TAMPA INC

FILED  
May 21, 2009  
Secretary of State

**Current Principal Place of Business:**

511 NORTH FRANKLIN STREET  
TAMPA, FL 33602 US

**New Principal Place of Business:**

**Current Mailing Address:**

511 NORTH FRANKLIN STREET  
TAMPA, FL 33602 US

**New Mailing Address:**

FEI Number: 26-3258328

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HYDE PARK ACCOUNTANTS PA  
2305 W MORRISON AVE  
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

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:  Delete  
Name: BELLUCCO, JAMIE L  
Address: 3915 PINE LIMB CT  
City-St-Zip: TAMPA, FL 33614 US

Title:  Delete  
Name: SHEEHAN, KEVIN M  
Address: 48-44 196 STREET  
City-St-Zip: FLUSHING, NY 11365 US

Title:  Delete  
Name: COHEN, BRIAN M  
Address: 345 BAYSHORE BLVD # 1710  
City-St-Zip: TAMPA, FL 33606 US

**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:

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: JAMIE L BELLUCCO

05/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date