

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000016944

FILED  
Aug 28, 2011  
Secretary of State

**Entity Name:** SMOKEY'S MOBILE BARBI-QUE, INC.

**Current Principal Place of Business:**

18894 NW 24 CT  
PEMBROKE PINES, FL 33029 US

**New Principal Place of Business:**

**Current Mailing Address:**

18894 NW 24 CT  
PEMBROKE PINES, FL 33029 US

**New Mailing Address:**

FEI Number: 27-1954669

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SAMMARCO, CHAD M  
18894 NW 24 CT  
PEMBROKE PINES, FL 33029 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: SAMMARCO, CHAD M  
Address: 18894 NW 24 CT  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: VP  
Name: SAMMARCO, BARBARA  
Address: 18894 NW 24 CT  
City-St-Zip: PEMBROKE PINES, FL 33029 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: CHAD SAMMARCO

PRES

08/28/2011

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

\_\_\_\_\_ Date