2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2012
Secretary of State

DOCUMENT# P10000077282

Entity Name: HEALTHY BITES FITNESS CUISINE INC.

Current Principal Place of Business:

645 W. MICHIGAN ST.
ORLANDO, FL 32805 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 568245
ORLANDO, FL 32856 US

New Mailing Address:

FEI Number: 27-3548235 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAW, PAMELA N
645 W. MICHIGAN ST.
ORLANDO, FL 32805 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: VPD
Name: LANGE, TAMMIE E
Address: 1215 E ESTHER STREET
City-St-Zip: ORLANDO, FL 32806 US

Title: PD
Name: EASTERLING, CHRIS
Address: 4533 CONWAY GARDENS ROAD
City-St-Zip: ORLANDO, FL 32806 US

Title: VP
Name: BURDEN, RANDY O
Address: 700 HARDMAN DR.
City-St-Zip: ORLANDO, FL 32806

Title: ST
Name: SHAW, PAMELA N
Address: 2901 S. OSCEOLA AVE
City-St-Zip: ORLANDO, FL 32806

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: PAMELA N SHAW ST 03/21/2012

Electronic Signature of Signing Officer or Director Date