

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000101742

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** FLAVOR UNIT ENTERTAINMENT INC.

**Current Principal Place of Business:**

119 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

119 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139

**New Mailing Address:**

61 DEANS LANE  
MONMOUTH JUNCTION, NJ 08852

**FEI Number:** 22-3424210

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: PRES  
Name: OWENS, DANA  
Address: 119 WASHINGTON AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP  
Name: COMPERE, SHAKIM  
Address: 3930 HARDEE ROAD  
City-St-Zip: MIAMI, FL 33133

Title: SECT  
Name: COMPERE, SHAKIM  
Address: 3930 HARDEE ROAD  
City-St-Zip: MIAMI, FL 33133

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: SHAKIM COMPERE

VP

04/25/2011

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

\_\_\_\_\_ Date