

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000028182

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** SIGNATURE CAKE TRUFFLES INC.

**Current Principal Place of Business:**

1224 SE 46TH LANE  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

**Current Mailing Address:**

2825 GLEASON PARKWAY  
CAPE CORAL, FL 33914 US

**New Mailing Address:**

**FEI Number:** 45-0968873

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHOFF, LIZANNE  
2825 GLEASON PARKWAY  
CAPE CORAL, FL 33914 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: OWN  
Name: SHOFF, LIZANNE  
Address: 2825 GLEASON PARKWAY  
City-St-Zip: CAPE CORAL, FL 33914 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: LIZANNE SHOFF

OWN

04/30/2012

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

\_\_\_\_\_  
Date