

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000028442

FILED
Jul 19, 2006
Secretary of State

Entity Name: FRAMERS MARKET-FLORIDA, INC.

Current Principal Place of Business:

1177 CLARE AVE
#2
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

3911 JOG RD
(SHOPPERS DEPOT WEST WALL #1)
GREENACRES, FL 33467 US

New Mailing Address:

15755 SUNNYLAND LANE
WELLINGTON, FL 33414 US

FEI Number: 65-0434688

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIVELACQUE, JUSTIN T
1177 CLARE AVE
SUITE #2
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

BIVELACQUE, JOHN T
15755 SUNNYLAND LANE
WELLINGTON, FL 33414 US

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: JOHN THOMAS BIVELACQUE

07/19/2006

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: DPST () Delete
Name: BIVELACQUE, JUSTIN T
Address: 1177 CLARE AVE.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP (X) Delete
Name: BIVELACQUE, JOHN T
Address: 1177 CLARE AVE
City-St-Zip: WEST PALM BEACH, FL 33401 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BIVELACQUE, JOHN T
Address: 1177 CLARE AVE.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN BIVELACQUE

OFFI

07/19/2006

Electronic Signature of Signing Officer or Director

Date