## 2007 FOR PROFIT CORPORATION ANNUAL REPORT.

## **DOCUMENT # P93000032638**

Principal Place of Business

COOPER CITY, FL 33321

TACHERN, DAVID

9410 GRIFFIN RD

COOPER CITY LUV'N OVEN INC.

Malling Address

1041 NW 125 AVE

SUNRISE, FL 33323 US

**FILED** Jan 29, 2007 08:00 AM Secretary of State



## DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

01252007 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 59-1629465 Not Applicable \$8.75 Additional

5. Certificate of Status Desired Fee Required

## DO NOT WRITE

1041 NW 125 AVE FORT LAUDERDALE, FL 33323				IN THIS SPACE		
8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE				d Agent aignature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Trust Fund Contrib			•		\$5.00 May Be Added to Fees	
10,	OFFICERS AND DIREC	TORS			· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VALENTE, SALVATORE 11191 SW 42 CT DAVIE, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD VALENTE, KAREN 11191 SW 42 CT DAVIE, FL					000000607624 01/31/07-80046-005 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN <sup>-</sup>	THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						Envide Statutes I further earlifuther the information

remove comy may make the micromation supplied with this liting does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR