


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P93000086771</b> 1. Entity Name T. & A. FOODS, INC.	
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Principal Place of Business 4814 US HWY 17 NO BOWLING GREEN, FL 33834 US	Mailing Address % MANAGING FOOD, LLC 1326 E. LUMSDEN RD. BRANDON, FL 33511 US
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**DO NOT WRITE IN THIS SPACE**



04042008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3224096	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  CURRY, CLIFTON C JR 750 W LUMSDEN RD SUITE B-103 BRANDON, FL 33511
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**DO NOT WRITE  
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U000000905198 05/01/08-80044-001 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD KAZBOUR, ZIAD A 1119 HUNT CLUB LANE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAZBOUR, TALAL 1326 E LUMSDEN ROAD BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAZBOUR, TAREK 1108 DEER RUN PL VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

<b>SIGNATURE:</b> 	<b>4-18-08</b>	<b>813.684-0622</b>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>