2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2008 08:00 AM Secretary of State DOCUMENT # P94000030984 1. Entity Name SUSAN JULIA'S, INC. Principal Place of Business Mailing Address 2481 SE OCEAN BLVD. 2481 SE OCEAN BLVD. STUART, FL 34996 STUART, FL 34996, CR2E034 (11/05) No Chg-P 04282008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0481450 Not Applicable **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DURSTON, SUSAN J 2481 SE OCEAN BLVD STUART, FL 34996 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. U00000940038 05/28/08~80048-018 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. D TITLE DURSTON, SUSAN J NAME STREET ADDRESS 2481 SE OCEAN BLVD. CITY-ST-ZIP STUART, FL 34996 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP NAME

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12. I hereby certify that the information supplied with this filipindicated on this report or suppliemental report is true and of the corporation or the receiver or trustee empoyared changed, or on an attachment with an address, with all of

STREET ADDRESS CITY-ST-ZIP

qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information and that hy signature shall have the same legal effect as if made under oath; that I am an officer or director this recort as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if