


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 30, 2006 8:00 am
Secretary of State

04-27-2006 90178 033 ***150.00

-DOCUMENT # P94000067751 1. Entity Name FLORIDA DELI PICKLE COMPANY, INC.	
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Principal Place of Business 200 N W 20TH AVENUE FT. LAUDERDALE, FL 33311 US	Mailing Address 200 N W 20TH AVENUE FT. LAUDERDALE, FL 33311 US
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DO NOT WRITE IN THIS SPACE



04062006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0524695	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

BABBITT, SCOTT B ESQ.
800 WEST CYPRESS CREEK RD.
SUITE 502
FT. LAUDERDALE, FL 33309

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BELL, GEORGE 200 N W 20TH AVENUE FT. LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HARTMAN, ERWIN 200 N W 20TH AVENUE FT. LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD HIRSCHKORN, MICHAEL 200 N W 20TH AVENUE FT. LAUDERDALE, FL 33311
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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone # _____