## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P94000070707**

1. Entity Name

THE AMERICAN GOURMET, INC.



FILED Jan 10, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

257 U.S. HIGHWAY ONE TEQUESTA, FL 33469 257 U.S. HIGHWAY ONE TEQUESTA, FL 33469



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01062006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0520536 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JUPITER INLET COLONY, FL 33469

JUPITER INLET COLONY, FL 33469

RODTH, TANIA L

169 BEACON LANE

RODTH, NANCY C 257 U.S. HIGHWAY ONE TEQUESTA, FL 33469

## DO NOT WRITE IN THIS SPACE

				***	THIO OF AGE
	named entity submits this statement for the p tions of registered agent.	urpose of changing its registered	office or	registered agent, or b	oth, in the State of Florida. 1 am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	fapplicable. (NOTE: Registered A	gent signatur	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution.	ng 🛮	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		ITÓRS	·		<del></del>
TITLE NAME STREET ADDRESS DITY-ST-ZIP	PD RODTH, THOMAS J 169 BEACON LANE JUPITER INLET COLONY, FL 33469				UQD000381183 01/11/06-80043-017 150.00
NAME STREET ADDRESS CITY-ST-ZIP	TD RODTH, HEATHER L 169 BEACON LANE JUPITER INLET COLONY, FL 33469				·
TITLE NAME CTREET ADDRESS	SD RODTH, NANCY C				

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 co	rporation 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:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME Street address

TITLE
RAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Thomas

OTYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

· Robth

6 (561) 747-1071