

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2005 8:00 am**  
**Secretary of State**

05-03-2005 90131 028 \*\*\*150.00

**DOCUMENT # P94000093049**

1. Entity Name  
PANAMA BEACH FOODS, INC.



Principal Place of Business  
10430 FRONT BEACH RD  
PANAMA CITY BEACH, FL 32407 US

Mailing Address  
% MANAGING FOOD, LLC  
1326 E. LUMSDEN RD.  
BRANDON, FL 33511

**14015923**



04062005 Chg-P CR2E034 (10/03)

4. FEI Number  
**59-3285879**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

KAZBOUR, TALAL  
2503 HWY 60 E  
VALRICO, FL 33594

## 7. Name and Address of New Registered Agent

Name **Talal Kazbour**

Street Address (P.O. Box Number is Not Acceptable)

**1326 E. Lumsden Rd**

City **Brandon**

**FL**

Zip Code **33511**

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]*

**Talal Kazbour**

**4-18-05**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **KAZBOUR, TALAL A**  
STREET ADDRESS **1326 E LUMSDEN ROAD**  
CITY-ST-ZIP **BRANDON, FL 33511**

TITLE **VP** ☐ Delete  
NAME **MARSHALL, SCOTT**  
STREET ADDRESS **1326 E LUMSDEN ROAD**  
CITY-ST-ZIP **BRANDON, FL 33511**

TITLE **VP** ☐ Delete  
NAME **MARSHALL, WILLIAM**  
STREET ADDRESS **1326 E LUMSDEN ROAD**  
CITY-ST-ZIP **BRANDON, FL 33511**

TITLE **T** ☐ Delete  
NAME **MARSHALL, ANDREW**  
STREET ADDRESS **1326 E LUMSDEN ROAD**  
CITY-ST-ZIP **BRANDON, FL 33511**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/18/05**

Date

**813-6871-0622**

Daytime Phone #