

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000001661

FILED
May 06, 2005
Secretary of State

Entity Name: THE HEALTHY GOURMET, INC

Current Principal Place of Business:

1305 HOMESTEAD RD
SUITE 104
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

Current Mailing Address:

3840 ELLIS ROAD
FT MYERS, FL 33904 US

New Mailing Address:

14851 ORANGE RIVER ROAD
FT MYERS, FL 33904 US

FEI Number: 65-0643102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRICKE, CARL
3840 ELLIS ROAD
FT MYERS, FL 33905 US

Name and Address of New Registered Agent:

FRICKE, CARL
14851 ORANGE RIVER ROAD
FT MYERS, FL 33905 US

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.

SIGNATURE:

05/06/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FRICKE, CARL A
Address: 3840 ELLIS RD
City-St-Zip: FT MYERS, FL 33905

Title: DS () Delete
Name: FRICKE, AMBER
Address: 3840 ELLIS RD
City-St-Zip: FT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FRICKE, CARL A
Address: 14851 ORANGE RIVER ROAD
City-St-Zip: FT MYERS, FL 33905

Title: DS (X) Change () Addition
Name: FRICKE, AMBER
Address: 14851 ORANGE RIVER ROAD
City-St-Zip: FT MYERS, FL 33905

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARL FRICKE

PRES

05/06/2005

Electronic Signature of Signing Officer or Director

Date