

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P97000052915

Entity Name: BREAKFAST STATION, INC.

**FILED**  
**Oct 01, 2012**  
**Secretary of State**

### **Current Principal Place of Business:**

10039 U.S. HIGHWAY 19  
PORT RICHEY, FL 34668

### **New Principal Place of Business:**

7335 LITTLE ROAD  
NEW PORT RICHEY, FL 34654

### **Current Mailing Address:**

10039 U.S. HIGHWAY 19  
PORT RICHEY, FL 34668

### **New Mailing Address:**

7335 LITTLE ROAD  
NEW PORT RICHEY, FL 34654

FEI Number: 59-3452246

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

### **Name and Address of Current Registered Agent:**

SMITH, CASH M  
10039 U.S. HIGHWAY 19  
PORT RICHEY, FL 34668 US

### **Name and Address of New Registered Agent:**

SMITH, CASH M  
7335 LITTLE ROAD  
NEW PORT RICHEY, FL 34654 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: CASH M. SMITH

10/01/2012

Electronic Signature of Registered Agent

Date

### **OFFICERS AND DIRECTORS:**

Title: S/T  
Name: SMITH, MORGAN T  
Address: 7335 LITTLE ROAD  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: DVP  
Name: SMITH, CASH M  
Address: 7335 LITTLE ROAD  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: DP  
Name: SMITH, CATHLEEN R  
Address: 7335 LITTLE ROAD  
City-St-Zip: NEW PORT RICHEY, FL 34654

I hereby 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 all other like empowered.

SIGNATURE: CASH M. SMITH

VP

10/01/2012

Electronic Signature of Signing Officer or Director

Date