

2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2007 NOV -5 PM 4:00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P98000003689																											
1. Entity Name CASUAL GOURMET FOODS, INC.																											
Principal Place of Business 4500 140TH AVE N SUITE 113 CLEARWATER, FL 33762		Mailing Address 4500 140TH AVE N SUITE 113 CLEARWATER, FL 33762																									
2. Principal Place of Business - No P.O. Box # 1528 Moffett Street Salinas, CA 93905		3. Mailing Address 1528 Moffett Street Salinas, CA 93905																									
City & State Salinas, CA		City & State Salinas, CA																									
Country USA		Country USA																									
4. FIC Number 59-3490563		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent RIZZO, BEN 4500 140TH AVE N #113 CLEARWATER, FL 33762		7. Name and Address of New Registered Agent Name PARACORP INCORPORATED 236 East 6th Ave Tallahassee, FL 32303																									
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 obligation of, registered agent.																											
SIGNATURE: <i>Scott Wheeler</i>		11/1/07																									
FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$200.00		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive this prior notice.																									
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																									
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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 amendment with an address, with all other like empowered.																											
SIGNATURE: Scott Wheeler, Sec.		10/31/07 (831)653-6262																									

M. Williams NOV - 5 2007