## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P98000014677** 

THE SERIOUS COOKIE COMPANY

1. Entity Name

## FILED Apr 27, 2005 8:00 am Secretary of State

04-27-2005 90317 009 \*\*\*150.00

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Principal Place of Business	Mailing Address				14000	332			
900 E. ATLANTIC BLVD. SUITE 17	*900 E. ATLANTIC BLVC Suite 17	•							
POMPANO BEACH, FL-33060	POMPANO BEACH, FL	33060.,			   []				
2. Principal Place of Business 419 Crossfield Circle	3. Mailing Address 419 Crossfi	ield C	Circle						
Suite, Apt. #, etc.	Suite, Apt. #, etc.			03312005	Chg-P	CR2E03	4 (10/03)	•	
Naples, FL	naples, FL Naples, FL			4. FEI Numb 65-082		•	<del>  </del>	oplied For ot Applicable	
34104 Country USA	34104	Country USA		5. Certificate	of Status Desired		8.75 Add ee Aequire		
Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent						
		N	lame	2205	Doon A				
<del>STUPARITZ;</del> ACAN'D   <del>200 E. ATLANTIC BL∀</del> D.			Sarafianos, Dean A. Street Address (P.O. Box Number is Not Acceptable) 419 Crossfield Circle						
SUITE 17			419 CI	COSSITE	id CITCI	е	<u> </u>		
P <del>OMPANO BEACH, FL-33060</del>							T		
		C	Cinaples,			FL 234464			
8. The above named entity submits this statement to the obligations of registered agent.	r the purpose of changing its	registered o	ffice or registe	red agent, or bo	th, in the State of F	lorida. I am fa	miliar with,	and accept	
A Least						4/2	1-5		
SIGNATURE	-car-ter								
	and title if applicable. (NOT	E: Registered Age	ent signature required	d when reinstating)		DATE	7	<u>&gt;</u>	
	${1}\mathcal{D}$			d when reinstating)		DATE	<u> </u>	<u></u>	
Significe, types or printed name of registared agent	9. Election Campa	ign Financine	g _ \$5	d when reinstating)	_	DATE (			
FILE NOWIII FEE IS \$150.00 , After May 1, 2005 Fee will be \$550.4	9. Election Campa Trust Fund Cont	ign Financing	g _ \$5	.00 May Be ded to Fees		DATE (	, , , ,		
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.4	9. Election Campa Trust Fund Cont	ign Financing tribution.	9 <b>\$5</b>	.00 May Be ded to Fees ADDITIONS	/CHANGES TO OF				
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FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.4  10. OFFICERS AND  TITLE PD- NAME SAFAFIANO, GEORGE	9. Election Campa Trust Fund Cont  DIRECTORS  Delete	ign Financing tribution.  11.  TITLE  NAME	Sara DDRESS 419	i.00 May Be ded to Fees  ADDITIONS	Dean A.				
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.4  10. OFFICERS AND  TITLE PD- NAME STREET ADDRESS 990-E. ATLANTIG BLVD.	9. Election Campa Trust Fund Cont  DIRECTORS  Delete	ign Financing tribution.  11.  ITTLE NAME STREET AL	S \$5 Add	ADDITIONS, afianos, Crossfieles, FL	Dean A. eld Circle 34104	2			
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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 gin address with all other like empowered.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

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