

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000061731

Entity Name: GREAT TASTES, INC.

FILED  
Jul 13, 2006  
Secretary of State

## Current Principal Place of Business:

285 E. PALMETTO PK. ROAD  
BOCA RATON, FL 33432 US

## New Principal Place of Business:

## Current Mailing Address:

285 E. PALMETTO PK. ROAD  
BOCA RATON, FL 33432 US

## New Mailing Address:

FEI Number: 65-0851933

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAYLES, LAURA P  
285 E. PALMETTO PARK RD.  
BOCA RATON, FL 33432 US

## Name and Address of New Registered Agent:

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:

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: P ( ) Delete  
Name: PICOT, LEONCE  
Address: 1700 S. OCEAN BLVD 8B  
City-St-Zip: POMPANO BEACH, FL 33062

Title: VP ( ) Delete  
Name: PICOT, CAROLYN G  
Address: 1700 S. OCEAN BLVD 8B  
City-St-Zip: POMPANO BEACH, FL 33062

Title: ST ( ) Delete  
Name: SAYLES, LAURA P  
Address: 5121 NE 29TH AVE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LAURA SAYLES

ST

07/13/2006

Electronic Signature of Signing Officer or Director

Date