2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000011538

Entity Name: CONTI'S CONCESSIONS, INCORPORATED

FILED Jan 18, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
Current P	rincipal Place	or Business:	New Principal Place	or Business:	
	LLION DRIVE LES, FL 33898	7692			
Current Mailing Address:			New Mailing Address:		
	LLION DRIVE LES, FL 33898	7692			
FEI Number	: 59-3556424	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	, MONICA LLION DRIVE LES, FL 33898	7692 US			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () HAMMOND, LAI 4043 STALLION LAKE WALES,	I DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () HAMMOND, JUI 4043 STALLION LAKE WALES,	I DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JUNE A. HAMMOND VΡ 01/18/2005