2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000100518

TRINITY, FL 34655

City-St-Zip:

Entity Name: T&IFOOD CONCEPTS, INC

FILED Apr 20, 2009 Secretary of State

		5 5 5 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5			
Current Principal Place of Business:			New Principal Place of Business:		
3780 TAMI SUITE B 2 OLDSMAF					
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
3780 TAMI SUITE B 2 OLDSMAF					
FEI Number:	: 59-3607856	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:	
1822 NOR SUITE 200 CLEARWA	ATER, FL 337	ROAD 65 US	purpose of changing its registered	d office or registered agent, or both,	
	e of Florida.		purpose of changing he registered	. omoo or rogiciou agent, or both,	
SIGNATU	RE:				
	Electron	nic Signature of Registered Ag	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (HOUVARDAS, 10628 PONTO TRINITY, FL 3	FINO CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (HOUVARDAS, 10628 PONTO		Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TRIFON HOUVARDAS MGRM 04/20/2009