

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S36331

FILED
Aug 20, 2009
Secretary of State

Entity Name: SAARA'S GOURMET KITCHEN, INC.

Current Principal Place of Business:

C/O LARRY MAHONEY
701 SO. "D" ST.
LAKE WORTH, FL 33460

New Principal Place of Business:

C/O LARRY MAHONEY
701 SO.
LAKE WORTH, FL 33460

Current Mailing Address:

C/O LARRY MAHONEY
701 SO. "D" ST.
LAKE WORTH, FL 33460

New Mailing Address:

C/O LARRY MAHONEY
701 SO.
LAKE WORTH, FL 33460

FEI Number: 65-6075800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'TOOLE, STEPHEN P.
521 LAKE AVENUE, SUITE 3
LAKE WORTH, FL 33460 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: RIPATTI, SAARA
Address: 111 SOUTH C STREET
City-St-Zip: LANTANA, FL

Title: D () Delete
Name: RIPATTI, SAARA
Address: 111 SOUTH C STREET
City-St-Zip: LANTANA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SAARA RIPATTI

PRES

08/20/2009

Electronic Signature of Signing Officer or Director

Date