2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S82515

City-St-Zip:

W PALM BEACH, FL

Entity Name: MOVIN' MEALS, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	TH MILITARY 1 BEACH, FL 33			
Current Mailing Address:			New Mailing Address:	
	TH MILITARY 1 BEACH, FL 33			
FEI Number	r: 65-0288247	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:
980 NOR ⁻	R, RUSSELL J. TH MILITARY 1 BEACH, FL 33			
	e named entity te of Florida.	submits this statement for the	ourpose of changing its registere	d office or registered agent, or both,
SIGNATU	IRE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR
Title: Name: Address:	PD (WURSTER, JC 2 INLET CAY [) Delete DHN J. DR.	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTOR () Change () Addition
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	PD (WURSTER, JC 2 INLET CAY E OCEAN RIDGE SD (WURSTER, DA 12863 MALLAF) Delete DHN J. DR. E, FL) Delete	Title: Name: Address:	
Title: Name: Address: City-St-Zip: Title: Name: Address:	PD (WURSTER, JC 2 INLET CAY E OCEAN RIDGE SD (WURSTER, DA 12863 MALLAF PALM BEACH TD (MORRIS, AGN 1483) Delete OHN J. OR. E, FL) Delete AVID A. RD CREEK DRIVE GARDENS, FL 33418) Delete ES C.	Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition

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.

City-St-Zip:

SIGNATURE: RUSSELL J. WARDER VP 04/16/2009