2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V07419

City-St-Zip:

CLEARWATER, FL 33764

Entity Name: MIKE'S PIES, INC.

FILED Mar 26, 2009 Secretary of State

Littly Na	IIIE. WIIKESE	ILO, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
8420 SUN TAMPA, F	STATE STREE L 33634 US				
Current Mailing Address:			New Mailing Address:		
8420 SUNSTATE STREET TAMPA, FL 33634				8420 SUNSTATE STREET TAMPA, FL 33634 US	
FEI Number	: 39-2215290	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:	
201 NORT SUITE 200 TAMPA, F	L 33602 US				
The above in the State	named entity: e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VST (MARTIN, GAYL 3202 CHAPIN A TAMPA, FL 33	AVE .	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (MARTIN, MICH 3202 CHAPIN A TAMPA, FL 33	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S (PROVATAS, M 2132 UNIVERS		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: MARY PROVATAS S 03/26/2009