


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2007 08:00 AM
Secretary of State

DOCUMENT # V34021
 1. Entity Name
COMMERCIAL FOOD EQUIPMENT MARKETING, INC.



Principal Place of Business Mailing Address
653 SEVERN ROAD **653 SEVERN ROAD**
SEVERNA PARK, MD 21146 US **SEVERNA PARK, MD 21146 US**

DO NOT WRITE IN THIS SPACE



03042007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
52-1780468 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
ARNOLD, CAROL
3980 COQUINA DRIVE
SANIBEL, FL 33957

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$350.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000661386
 03/20/07-80038-020 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD GILL, KENNETH R 653 SEVERN ROAD SEVERNA PARK, MD 21146 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD GILL, JOANNE F 653 SEVERN ROAD SEVERNA PARK, MD 21146 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth R. Gill* **3-5-07** **410-451-4600**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #