

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V14718

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: MISTER TWISTER PRETZELS, INC.

**Current Principal Place of Business:**

3705 MASON ROAD  
NEW HILL, NC 27562 US

**New Principal Place of Business:**

**Current Mailing Address:**

3705 MASON ROAD  
NEW HILL, NC 27562 US

**New Mailing Address:**

FEI Number: 52-1817497      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GARCIA, SUSAN M  
901 PONCE DE LEON BLVD  
SUITE 606  
CORAL GABLES, FL 33134 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: P ( ) Delete  
Name: WANG, BOBBY  
Address: 3705 MASON ROAD  
City-St-Zip: NEW HILL, NC 27562 US

Title: VP ( ) Delete  
Name: WANG, MEI-FENG  
Address: 3705 MASON ROAD  
City-St-Zip: NEW HILL, NC 27562 US

Title: SEC ( ) Delete  
Name: WANG, MILLICENT  
Address: 3705 MASON ROAD  
City-St-Zip: NEW HILL, NC 27562

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ACCT ( ) Change (X) Addition  
Name: TRAMA, NEIL C  
Address: 745 NORTH LINCOLN AVE  
City-St-Zip: SCRANTON, PA 18504

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: NEIL C TRAMA

ACCT

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date