

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006357

FILED
Jun 30, 2006
Secretary of State

Entity Name: CONVENIENCE FOOD SYSTEMS, INC.

Current Principal Place of Business:

8000 NORTH DALLAS PARKWAY
FRISCO, TX 75034

New Principal Place of Business:

Current Mailing Address:

8000 NORTH DALLAS PARKWAY
FRISCO, TX 75034

New Mailing Address:

FEI Number: 22-2977967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CD () Delete
Name: HARSEN, JOHN-OLE
Address: BEEKAKKER 11,5761 EN BAKEL
City-St-Zip: THE NETHERLANDS,

Title: PD () Delete
Name: BAYAT, TONY
Address: 8000 NORTH DALLAS PARKWAY
City-St-Zip: FRISCO, TX 75034

Title: SD () Delete
Name: LEE, JONATHAN
Address: BEEKAKKER 11,5761 EN BAKEL
City-St-Zip: THE NETHERLANDS,

Title: VPTD () Delete
Name: STRICKER, BRYON
Address: 8000 NORTH DALLAS PARKWAY
City-St-Zip: FRISCO, TX 75034

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BRYON L. STRICKER

VPTD

06/30/2006

Electronic Signature of Signing Officer or Director

_____ Date