

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109170

Entity Name: BRAINFOOD CORP.

FILED  
May 01, 2007  
Secretary of State

## Current Principal Place of Business:

10156 NW 41 ST  
DORAL, FL 33178

## New Principal Place of Business:

4842 NW 109 PL  
DORAL, FL 33178

## Current Mailing Address:

10156 NW 41 ST  
DORAL, FL 33178

## New Mailing Address:

4842 NW 109 PL  
DORAL, FL 33178

FEI Number: 43-1978175

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BONILLA, DORIS  
10156 NW 41 ST  
DORAL, FL 33178 US

## Name and Address of New Registered Agent:

BONILLA, DORIS  
4842 NW 109 PL  
DORAL, FL 33178 US

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:

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: BONILLA, DORIS  
Address: 10156 NW 41 ST  
City-St-Zip: DORAL, FL 33178

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: BONILLA, DORIS  
Address: 4842 NW 109 PL  
City-St-Zip: DORAL, FL 33178

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: DORIS BONILLA

PSD

05/01/2007

Electronic Signature of Signing Officer or Director

Date