

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000037746

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: RELIABLE FOOD SERVICES, INC.

**Current Principal Place of Business:**

5016 JOHNSON ST  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

5016 JOHNSON ST  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 20-3345117      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MCCORMICK, JR., EDWARD J ESQ.  
111 SW 3RD STREET, PENTHOUSE  
MIAMI, FL 33130 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: PD ( ) Delete  
Name: MARTIN, SCOTT  
Address: 5016 JOHNSON ST  
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD ( ) Delete  
Name: HARVEST, WENDY  
Address: 5016 JOHNSON ST  
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD ( ) Delete  
Name: COMEAU, PAUL  
Address: 5016 JOHNSON ST  
City-St-Zip: HOLLYWOOD, FL 33021

Title: STD ( ) Delete  
Name: COMEAU, TOM  
Address: 5016 JOHNSON ST  
City-St-Zip: HOLLYWOOD, FL 33021

**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 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: TOM COMEAU

STD

01/08/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date