2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000075996

Entity Name: TASTE OF FREEDOM, INC.

FILED Apr 23, 2006 Secretary of State

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|---|---|-------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | |
| P.O. BOX NORTH M | 681780 IIAMI, FL 33168 | 31780 US | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| P.O. BOX NORTH M | 681780 IIAMI, FL 33168 | 31780 US | | | |
| FEI Number: | : 65-0566875 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | l Address of C | urrent Registered Agent: | Name and Address o | Name and Address of New Registered Agent: | |
| | DANNIE L . 184TH WAY KE PINES, FL (| 33029 US | | | |
| | named entity s e of Florida. | ubmits this statement for the | purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| | Electron | c Signature of Registered Ag | ent | Date | |
| Election Car | mpaign Financing | Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | RIVERS, DANNI 1023 N.W. 1847 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: DANNIE L. RIVERS D 04/23/2006