## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE: 2

## Apr 26, 2006 08:00 AM Secretary of State **DOCUMENT # 433197** 1. Entity Name BEAVER STREET FOODS, INC. Principal Place of Business Mailing Address P.O. BOX 41430 1741 W. BEAVER ST. IACKSONVILLE, FL 32209 US JACKSONVILLE, FL 32203-1430 US a mara<u>ning pinakani di di anala a</u> No Chg-P CR2E034 (11/05) 01172006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1555937 Not Applicable \$8.75 Additional 5. Certificate of Status Desired ٠... Fee Required 6. Name and Address of Current Registered Agent FRISCH, HANS DO NOT WRITE 1741 W. BEAVER STREET JACKSONVILLE, FL 32209 IN THIS SPACE 5. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 000000535765 05/08/06-80067-004 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS CVAS TITLE NAME FRISCH, HANS STREET ADDRESS 1741 W. BEAVER STREET CITY-ST-ZIP JACKSONVILLE, FL TITLE FRISCH, BENJAMIN NAME STREET ADDRESS 1741 W. BEAVER STREET CITY-ST-ZIP JACKSONVILLE, FL VN NAME FRISCH, E. KARL STREET ADDRESS 1741 W. BEAVER ST. DO NOT WRITE CITY-ST-ZIP JACKSONVILLE, FL IN THIS SPACE 7172.8 NAME FRISCH, HANS STREET ADDRESS 1741 W. BEAVER STREET JACKSONVILLE, FL CITY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**