


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90035 029 ***150.00

DOCUMENT # 486388	
1. Entity Name CUISINE INTERNATIONAL, INC.	

Principal Place of Business 5001 N.W. 36TH ST. MIAMI SPRINGS, FL 33166	Mailing Address 5001 N.W. 36TH ST. MIAMI SPRINGS, FL 33166
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2. Principal Place of Business - No P.O. Box # 1819 79th ST CAUSEWAY	3. Mailing Address 1819 79th ST CAUSEWAY
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State NORTH BAY VILLAGE FL	City & State NORTH BAY VILLAGE FL
Zip 33141	Zip 33141
Country	Country

6. Name and Address of Current Registered Agent GRENTNER, CHARLES G 5001 NW 36 ST MIAMI SPG, FL 33166	
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7. Name and Address of New Registered Agent Name: _____ Street Address (P.O. Box Number is Not Acceptable) 1819 79th ST CAUSEWAY NORTH BAY VILLAGE FL Zip Code 33141	
8. 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: <u>Charles G. Grentner</u> DATE: <u>3/29/07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>	

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST GRENTNER, CHARLES G 5001 NW 36ST. MIAMI, FL 33166 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <u>Charles G. Grentner</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>3/29/07 305-865-7100</u> <small>Date Daytime Phone #</small>