2006 FOR PROFIT CORPORATION

Mar 27, 2006 08:00 AM Secretary of State ANNUAL REPORT **DOCUMENT #834441** BERNARD FOOD INDUSTRIES, INC. Principal Place of Business Mailing Address 1125 HARTREY AVENUE 1125 HARTREY AVENUE **BOX 1497** BOX 1497 EVANSTON, IL 60204 EVANSTON, IL 60204 03152006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 36-2103797 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MEISELES, SANFORD DO NOT WRITE 8016 TRAVELERS TREE DR. BOCA RATON, FL 33433 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title it applicable INOTE: Registered Adent signature required when reinstating! DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 U00000482103 04/11/86-80060-013 150.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE MAME BERNARD, STEVEN 1125 HARTREY AVE., P.O. BOX 1497 STREET ADDRESS CITY-ST-ZIP EVANSTON, IL 60204 TITLE NAME BERNARD, JULES F 1125 HARTREY AVE., P.O. BOX 1497 STREET ACCRESS CITY-ST-ZIP EVANSTON, IL 60204 TITLE NAME STREET ADDRESS DO NOT WRITE COTY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS C)TY-ST-27P Talke

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 of powered to object 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 direct like ampowered.

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-ST-ZIP

> STEVEN BERNARD SIGNING OFFICER OR DIRECTOR

3-15-2006

847-869-5222

Daytime Phone #

FILED