2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004019

Entity Name: CHEF MERITO, INC

City-St-Zip: VAN NUYS, CA 91405

FILED Sep 06, 2007 Secretary of State

•		. ,		
Current Principal Place of Business:			New Principal Place of Business:	
	EPULVEDA BI S, CA 91405	.VD.		
Current Mailing Address:			New Mailing Address:	
	EPULVEDA BI S, CA 91405	LVD.		
FEI Number	: 95-4046124	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
236 E. SIX TALLAHA: The above	RP INCORPORTH AVENUE SSEE, FL 323 named entity of of Florida.	03 US	purpose of changing its registere	ed office or registered agent, or both
SIGNATUI				
Election Ca	nce with s. 607.19 mpaign Financin	nic Signature of Registered Ag (3(2)(b), F.S., the corporation did n Trust Fund Contribution ().	ot receive the prior notice.	Date
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	PSD (GARCIA, PLINI 7915 SEPULVI VAN NUYS, CA	EDA BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (GARCIA, PLINI 7915 SEPULVI VAN NUYS, CA	EDA BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	CFOD (CORUGEDO, 3 7915 SEPULVI VAN NUYS, CA	EDA BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (CORUGEDO, A 7915 SEPULVI VAN NUYS, CA	EDA BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	D (GARCIAS, ALE 7915 SEPULVI		Title: Name: Address:	() Change () Addition

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.

City-St-Zip:

SIGNATURE: PLINIO GARICA, JR. PSD 09/06/2007