2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006
Secretary of State

DOCUMENT# F79443

Entity Name: MIAMI QUALITY FOODS, INC.

Current Principal Place of Business:

284 NW 27TH ST
MIAMI, FL 331274122

New Principal Place of Business:

Current Mailing Address:

284 NW 27TH ST
MIAMI, FL 331274122

New Mailing Address:

FEI Number: 59-2191221 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARCIA, ORESTES L
8916 NW 171 LANE
MIAMI, FL 33018 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	AGUILAR, JOSE R	
Address:	2089 BEIDGE PORT	
City-St-Zip:	COCONUT GROVE, FL	
Title:	P	( ) Delete
Name:	GARCIA, ORESTES,	
Address:	995 W 29 STREET APT. 111	
City-St-Zip:	HIALEAH, FL 33012	
Title:	SD	( ) Delete
Name:	AGUILAR, ISRAEL A.,	
Address:	6143 SW 114 COURT	
City-St-Zip:	MIAMI, FL	
Title:	TD	( ) Delete
Name:	TAMBINI, ANA	
Address:	6800 S W 63 ST	
City-St-Zip:	MIAMI, FL 33143	
Title:	VP	( ) Delete
Name:	GISPERT, AMERICA C	
Address:	11459 SW 60 LANE	
City-St-Zip:	MIAMI, FL 33173	
Title:	D	( ) Delete
Name:	GISPERT, JOSEM	
Address:	11459 SW 60 LANE	
City-St-Zip:	MIAMI, FL 33173	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	GISPERT, JOSE M	
Address:	11459 SW 60 LANE	
City-St-Zip:	MIAMI, FL 33173	

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: ORESTES GARCIA P 03/17/2006

Electronic Signature of Signing Officer or Director — Date