


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # F96000004361</b> 1. Entity Name <b>NESSE FOODS, INC.</b>	
--	---

Principal Place of Business <b>1001 N. US HIGHWAY 1 SUITE 711 JUPITER, FL 33477 US</b>	Mailing Address <b>1001 N. US HIGHWAY 1 SUITE 711 JUPITER, FL 33477 US</b>
---	---

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  
  
**PARACORP INCORPORATED  
236 EAST 6TH AVENUE  
TALLAHASSEE, FL 32303**

**DO NOT WRITE  
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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent, and one if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00  
Due by September 7, 2005**

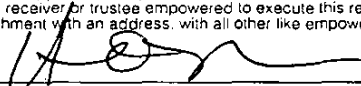
9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTDC NESSE, HOWARD 1001 N US HWY 1 JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD NESSE, CANDACE 1001 N US HWY 1 JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**500058535315**  
**08/12/05--01059--002 \*\*\$50.00**

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:**  **HOWARD NESSE Pres 7/27/05 561 7485568**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED

05 AUG -2 AM 10: 51

SEC. OF STATE  
TALLAHASSEE, FLORIDA



07262005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>95-4453600</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	