2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000094174 03-23-2007 90170 023 ****50.00 1. Entity Name QUANTAFOODS L.L.C. Principal Place of Business Mailing Address 498 VENETIAN VILLA DR. 498 VENETIAN VILLA DR. NEW SMYRNA BEACH, FL 32168 NEW SMYRNA BEACH, FL 32168 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02282007 Chg-LLC CR2E083 (12/06) City & State 4. FEI Number Applied For City & State Not Applicable 20-3522261 Country Zip Country Zip \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YANICK, PAUL, JR Street Address (P.O. Box Number is Not Acceptable) 3539 GRAND TUSCANY WAY TUSCANY RESERVE NEW SMYRNA BEACH, FL 32168 City Zip Code 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 egistered agen PAUL YANICK, JR. SIGNATURE¹ of registered agent and title if applicable. Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGRM TITLE TITLE Delete Addition YANICK, PAUL JR NAME NAME 3527 GRANDE TUSCANY WAY STREET ADDRESS STREET ADDRESS NEW SMYRNA BEACH, FL 32168 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE [] Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P ☐ Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP. CITY-ST-7IP 11. I hereby cartify 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 is true-end accurate and that my signature shall have the same legal effect as if made under each; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. -8-07

JRE: V PAUL YANICK, JR.

SIGNATURE AND TYPED OR FRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE: **∠**

Mar 23, 2007 8:00 am

Daytime Phone #

Secretary of State