


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 08, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # M21769  
 1. Entity Name  
 CUBANITA FROZEN FOODS CORP.



Principal Place of Business 2222 NW 21 TERRACE MIAMI, FL 33142	Mailing Address 10720 CARIBBEAN BLVD 440 MIAMI, FL 33189
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**DO NOT WRITE IN THIS SPACE**



02022006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2608508	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 BARBOZA, FELIX  
 4055 SW 111 AVE  
 MIAMI, FL

**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 title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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	PTD BARBOZA, FELIX M. 4055 SW 111 AVE. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARBOZA, MARIA M. 4055 SW 111 AVE. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BARBOZA, DANIEL 8741 RIDGELAND DRIVE MIAMI, FL 33157
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000424934  
 02/18/06-80072-011 150.00

**DO NOT WRITE IN THIS SPACE**

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 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: Felix M. Barboza FELIX M. BARBOZA PRESIDENT Date: \_\_\_\_\_ 305-635-4011 Daytime Phone #