

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000040017

Entity Name: ARUBA FOOD SERVICE INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

4840 LAKE WOARTH ROAD
GREEN ACRES, FL 33463

New Principal Place of Business:

Current Mailing Address:

6542 W ATLANTIC BLVD
MARGATE, FL 33063

New Mailing Address:

FEI Number: 65-1051146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTRA, GUSTAVO
901 PONCE DE LEON BLVD
STE 606
CORAL GABLES, FL 33134 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: PD () Delete
Name: BARTRA, GUSTAVO
Address: 6540 W ATLANTIC BLVD
City-St-Zip: MARGATE, FL 33063

Title: SD () Delete
Name: BARTRA, GUSTAVO JR
Address: 6540 W ATLANTIC BLVD
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: GUSTAVO BARTRA

PD

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date