

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000069581

FILED
Mar 31, 2008
Secretary of State

Entity Name: ARZOLA FINER FOODS CORP.

Current Principal Place of Business:

3310 S MAYDELL DR
TAMPA, FL 33619 US

New Principal Place of Business:

3308 S MAYDELL DR
TAMPA, FL 33619 US

Current Mailing Address:

PO BOX 89476
TAMPA, FL 33689 US

New Mailing Address:

FEI Number: 59-3688375 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARZOLA, ALBERTO JR.
2256 N KEPLER ROAD
DELAND, FL 32724 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: P () Delete
Name: ARZOLA, ALBERTO
Address: 3310 S MAYDELL DR
City-St-Zip: TAMPA, FL 33619

Title: V () Delete
Name: ARZOLA, MIRIAM
Address: 3310 S MAYDELL DR
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARZOLA, ALBERTO
Address: 3308 S MAYDELL DR
City-St-Zip: TAMPA, FL 33619

Title: V (X) Change () Addition
Name: ARZOLA, MIRIAM
Address: 3308 S MAYDELL DR
City-St-Zip: TAMPA, FL 33619

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: ALBERTO ARZOLA

P

03/31/2008

Electronic Signature of Signing Officer or Director

_____ Date