## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 30, 2007 08:00 Al Secretary of State

				1 Sacratary of Ci			
DOCUMENT # P0000098270  1. Entity Name PASTA EXPRESS COMPANY				Secretary of S			
Principal Plac	e of Business	Mailing Address					
5725 SW 8TI MIAMI, FL 33		5725 SW 8TH ST. MIAMI, FL 33144					
DO NOT WOITE IN THE COAC				01042007	No Chg-P	CR2E034 (11/	05)
DO NOT WRITE IN THIS SPAC			UE .	4. FEI Numb			Applied For
				01-064	13413	<u> </u>	Not Applicable
				5. Certificate	of Status Desired	□ \$8.75 Fee Rec	Additional quired
6. Name and Address of Current Registered Agent							
MARMISH, PAUL M ESQ 3390 KAPOT TERRACE MIRAMAR, FL 33025			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_	Signature, typed or printed name of registered agent and t	itle if applicable (NOTE Registere	d Agent signature required	d when reinstating)		DATE	
FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.				.00 May Be led to Fees			
10.	OFFICERS AND DIF	ECTORS					
TITLE NAME	D SANDERS, FERNANDO						
STREET ADDRESS	•						
CITY-ST-ZIP	MIAMI, FL 33144				Hanana	1741910	
TITLE	D				05/15/07-	)741810 -80045-012	150.00
NAME	SANDERS, LEONARD				20, 20, 01		****
STREET ADDRESS CITY-ST-ZIP	5725 SW 8TH ST.   MIAMI, FL 33144						
ALL CAL TIL							

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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 ceth; 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:

TITLE NAME

THLE

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SANDERS, RICHARD J JR 5725 SW 8TH ST.

MIAMI, FL 33144

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Sanders J.

4/27/0

DO NOT WRITE

IN THIS SPACE

305-261-3899

Daytma Phora #