


FILED
Jul 05, 2007 8:00 am
Secretary of State

04-30-2007 90850 001 ***150.00

**2007 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P00000108444 1. Entity Name CHICKEN, CHICKEN FOOD, INC.			
Principal Place of Business 19575 BISCAYNE BLVD. AVENTURA, FL 33180		Mailing Address 19575 BISCAYNE BLVD. AVENTURA, FL 33180	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	
4. FEI Number 65-1062399		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LONDONO, LUIS F 19575 BISCAYNE BLVD. AVENTURA, FL 33180		7. Name and Address of New Registered Agent Name Luis F Londono Street Address (P.O. Box Number is Not Acceptable) 19575 Biscayne Blvd Aventura FL City Aventura FL Zip Code 33180	
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 <u><i>C. J. Mann</i></u> President 5/31/07			
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD LONDONO, LUIS F 4382 FOX RIDGE DRIVE FORT LAUDERDALE, FL 33331	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD LONDONO, LUIS F 3507 OAKS WAY # 909 POMPADOUR BEACH, FL 33069
<input type="checkbox"/> Delete	<input checked="" type="checkbox"/>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u><i>C. J. Mann</i></u>		Date: 5/31/07	

66020083



01102007 Chg-P CR2E034 (12/06)

4. FEI Number **65-1062399** Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LONDONO, LUIS F 19575 BISCAYNE BLVD. AVENTURA, FL 33180		7. Name and Address of New Registered Agent Name Luis F Londono Street Address (P.O. Box Number is Not Acceptable) 19575 Biscayne Blvd Aventura FL City Aventura FL Zip Code 33180	
---	--	--	--

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 *C. J. Mann* **President** **5/31/07**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD LONDONO, LUIS F 4382 FOX RIDGE DRIVE FORT LAUDERDALE, FL 33331	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD LONDONO, LUIS F 3507 OAKS WAY # 909 POMPADOUR BEACH, FL 33069
<input type="checkbox"/> Delete	<input checked="" type="checkbox"/>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: *C. J. Mann* Date: **5/31/07**