

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000015156

Entity Name: ALADDIN FOODS INC.

FILED  
Jul 03, 2009  
Secretary of State

## Current Principal Place of Business:

3896 N. LAKE BVLD  
WEST PALM BEACH, FL 33403

## New Principal Place of Business:

## Current Mailing Address:

3896 N. LAKE BVLD  
WEST PALM BEACH, FL 33403

## New Mailing Address:

FEI Number: 65-1101278

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARBID, SUHA  
4945 ARTHUR ST.  
PALM BCH GARDENS, FL 33418 US

## Name and Address of New Registered Agent:

ARBID, SUHA  
10868 LARCH COURT  
PALM BCH GARDENS, FL 33418 US

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: SUHA ARBID

07/03/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ARBID, SUHA  
Address: 4595 ARTHUR ST.  
City-St-Zip: PALM BCH GARDENS, FL 33418

Title: VP ( ) Delete  
Name: ARBID, WAHIB  
Address: 4595 ARTHUR ST  
City-St-Zip: PALM BCH GARDENS, FL 33418

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ARBID, SUHA  
Address: 10868 LARCH COURT  
City-St-Zip: PALM BCH GARDENS, FL 33418

Title: VP (X) Change ( ) Addition  
Name: ARBID, WAHIB  
Address: 10868 LARCH COURT  
City-St-Zip: PALM BCH GARDENS, FL 33418

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: SUHA ARBID

PRES

07/03/2009

Electronic Signature of Signing Officer or Director

Date