2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005
Secretary of State

DOCUMENT# P01000015348

Entity Name: PRO-CHEF CULINARY CONCEPTS, INC.

Current Principal Place of Business:

6500 SUNSET WAY #206A
SAINT PETE BEACH, FL 33706

New Principal Place of Business:

6800 GULFPORT BLVD. SOUTH
#111
ST. PETERSBURG, FL 33707

Current Mailing Address:

1768 VICTORIA WAY
SAN MARCOS, CA 92069

New Mailing Address:

FEI Number: 59-3697769 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWIS, BRIAN
6500 SUNSET WAY #206A
ST. PETE BEACH, FL 33706 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: CD ( ) Delete
Name: LEWIS, DELANO E SR
Address: 7140 LAS VISTAS ROAD
City-St-Zip: LOS CRUCES, NM 88005

Title: PTD ( ) Delete
Name: LEWIS, DELANO E JR
Address: 1768 VICTORIA WAY
City-St-Zip: SAN MARCOS, CA 92069

Title: VD ( ) Delete
Name: LEWIS, BRIAN P
Address: 6500 SUNSET WAY, APT 206A
City-St-Zip: ST PETE BEACH, FL 33076

Title: SD ( ) Delete
Name: LEWIS, GAYLE
Address: 7140 LAS VISTAS ROAD
City-St-Zip: LOS CRUCES, NM 88005

Title: D ( ) Delete
Name: BRADDOCK, RICHARD
Address: 375 PARK AVE, SUITE 3107
City-St-Zip: NEW YORK, NY 10152

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: DELANO E LEWIS JR PTD 04/18/2005

Electronic Signature of Signing Officer or Director — Date