

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

T. Roberts FEB 15 2006

DOCUMENT # P01000092935

1. Entity Name
MEALS INTERNATIONAL, INC.



Principal Place of Business
7920 PINES BLVD
PEMBROKE PINES, FL 33024

Mailing Address
7920 PINES BLVD
PEMBROKE PINES, FL 33024

FILED
06 FEB 13 AM 8:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02032006 Chg-P CR2E034 (11/05)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-1140922

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

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 D ☒ Delete
NAME PEREZ, NELSON
STREET ADDRESS 12841 NW 18 CT
CITY-ST-ZIP PEMBROKE PINES, FL 33028

TITLE D,P,S ☐ Change ☒ Addition
NAME Adolfo Gomez
STREET ADDRESS 16444 S.W. 30th Street, Miramar, FL 33027
CITY-ST-ZIP

TITLE D ☒ Delete
NAME PEREZ, AURA D
STREET ADDRESS 12841 NW 18 CT
CITY-ST-ZIP PEMBROKE PINES, FL 33028

TITLE D,T,VP ☐ Change ☒ Addition
NAME Diego Quintero
STREET ADDRESS 641 Sand Creek Circle
CITY-ST-ZIP Weston, FL 33327

TITLE D ☒ Delete
NAME GOMEZ, EMILIO R
STREET ADDRESS 140 NW 76 AVE
CITY-ST-ZIP PEMBROKE PINES, FL 33024

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
100066127081
02/17/06--01014--002 **\$61.25

TITLE D ☒ Delete
NAME GOMEZ, DIANELIS R
STREET ADDRESS 140 NW 76 AVE
CITY-ST-ZIP PEMBROKE PINES, FL 33024

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #