2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000108725

FILED Apr 29, 2005 Secretary of State

Entity Name: VENFOOD DISTRIBUTORS, INC. **Current Principal Place of Business: New Principal Place of Business:** 15990 NW 49TH AVE. MIAMI, FL 33014 **Current Mailing Address: New Mailing Address:** 15990 NW 49TH AVE. MIAMI, FL 33014 FEI Number: 65-1151915 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: QUINTERO, OSWALDO QUINTERO, OSWALDO 8375 NW 68 ST. 15990 NW 49 AVE MIAMI, FL 33166 MIAMI, FL 33014 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: 04/29/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition QUINTERO, OSWALDO Name: Name: 15990 NW 49TH AVE. Address: Address: City-St-Zip: MIAMI, FL 33014 City-St-Zip: Title: () Delete Title: () Change () Addition BENAVIDES, CARLOS Name: Name: 7030 NW 177 ST. #A-106 Address: Address: MIAMI, FL 33015 City-St-Zip: 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 Statutés. 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: OSWALDO QUINTERO VD 04/29/2005