FILED
Apr 29, 2003 8:00 am
Secretary of State

04-29-2003 90071 044 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000004611

1. Entity Name
NATIONS FOOD INC.

Principal Place of Business	Mailing Address
4851 NW 79TH AVE, LOCAL #5 MIAMI, FL 33166	4851 NW 79TH AVE, LOCAL #5 MIAMI, FL 33166

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
7828 N.W. 53 STREET	7828 N.W. 53 STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.
MIAMI	MIAMI
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33166 Country: DADE	Zip: 33166 Country: DADE

4. FEI Number: 04-3586567 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CONTINENTAL FINANCIAL GROUP CORP.
3211 PONCE DE LEON BLVD, SUITE 204
CORAL GABLES, FL 33134

7. Name and Address of New Registered Agent

Name: LUIS GERMAN OSORNO
Street Address (P.O. Box Number is Not Acceptable): 7828 NW. 53 STREET
City: MIAMI FL Zip Code: 33166

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: _____ DATE: 4/23/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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	D MONTOYA-ECHAURI, ALFONSO 4851 NW 79TH AVE, LOCAL #5 MIAMI, FL 33166	☒ Delete	PRESIDENT LUIS GERMAN OSORNO 6901 SUNRISE PL. CORAL GABLES FL 33133	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	VICE PRESIDENT ALFONSO MONTOYA-ECHAURI 100 BAYVIEW DRIVE AP #2020 SUNNY ISLES FL. 33166	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TREASURER LUIS GERMAN OSORNO 6901 SUNRISE PL. CORAL GABLES FL. 33133	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ LUIS G. OSORNO 305-213-3956 4/21/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #