2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

DOCUMENT# P02000037621

Entity Name: ISLAND FOODS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2069 AMERICANA BLVD
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

2069 AMERICANA BLVD
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 01-0656245 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALI, AMIN M
10136 CANOPY TREE CT.
ORLANDO, FL 332836 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: D ( ) Delete
Name: ALI, NOORUDDIN
Address: 2069 AMERICANA BLVD
City-St-Zip: ORLANDO, FL 32839

Title: P ( ) Delete
Name: ALI, AMIN M
Address: 10136 CANOPY TREE COURT
City-St-Zip: ORLANDO, FL 32836 O

Title: VP ( ) Delete
Name: ALI, NIZAR
Address: 9030 SHAWN PARK PLACE
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition
Name: ALI, MEHJABEEN A
Address: 2069 AMERICANA BLVD
City-St-Zip: ORLANDO, FL 32839

Title: VP (X) Change ( ) Addition
Name: ALI, AMIN M
Address: 10136 CANOPY TREE COURT
City-St-Zip: ORLANDO, FL 32836 O

Title: P (X) Change ( ) Addition
Name: ALI, NIZAR
Address: 9030 SHAWN PARK PLACE
City-St-Zip: ORLANDO, FL 32819

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: AMIN ALI P 04/29/2007

Electronic Signature of Signing Officer or Director — Date