

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086828

FILED
Apr 28, 2006
Secretary of State

Entity Name: KOSHER BITE, INC.

Current Principal Place of Business:

20521 NE 20TH COURT
MIAMI, FL 33328

New Principal Place of Business:

20521 NE 20TH COURT
MIAMI, FL 33328 US

Current Mailing Address:

20521 NE 20TH COURT
MIAMI, FL 33328

New Mailing Address:

20521 NE 20TH COURT
MIAMI, FL 33328 US

FEI Number: 71-0899020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALILA, ARIE
20521 NE 20TH CT
MIAMI, FL 33179 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: Galsky, Ari
Address: 20281 E COUNTRY CLUB APT 2107
City-St-Zip: Aventura, FL 33180

Title: D () Delete
Name: Balila, Arie
Address: 20521 NE 20TH CT
City-St-Zip: Miami, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: Galsky, Ari
Address: 20281 E COUNTRY CLUB APT 2107
City-St-Zip: Aventura, FL 33180 US

Title: D (X) Change () Addition
Name: Balila, Arie
Address: 20521 NE 20TH CT
City-St-Zip: Miami, FL 33179 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ARI Galsky

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date