
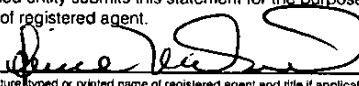



# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 13, 2006 8:00 am**  
**Secretary of State**

04-13-2006 90310 021 \*\*\*150.00

<b>DOCUMENT # P02000119500</b> 1. Entity Name <b>R &amp; R BABY FOODS, INC.</b>					
Principal Place of Business <b>80 PONDELLA ROAD NORTH FORT MYERS, FL 33903</b>			Mailing Address <b>3323 PELICAN BLVD CAPE CORAL, FL 33914</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc. <b>80 Pondella Road</b>		Suite, Apt. #, etc. <b>80 Pondella Road</b>			
City & State <b>NORTH FORT MYERS</b>		City & State <b>NORTH FORT MYERS</b>			
Zip <b>33903</b>	Country	Zip <b>33903</b>	Country	04102006    Chg-P    CR2E034 (11/05)	
4. FEI Number <b>46-0507932</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>HERNANDEZ-DIAZ, JAVIER 3323 PELICAN BLVD CAPE CORAL, FL 33914</b>			Name <b>JAIIME MADRID</b> Street Address (P.O. Box Number is Not Acceptable) <b>2927 SE 5TH AVE</b> City <b>Cape Coral</b> <b>FL</b> Zip Code <b>33904</b>		
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 *  <small>Signature typed or printed name of registered agent and title if applicable.</small>			DATE <b>04/10/06</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P HERNANDEZ-DIAZ, JAVIER 3323 PELICAN BLVD CAPE CORAL, FL 33914</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VP MADRID, JAIIME 2927 SE 5TH AVE CAPE CORAL, FL 33904</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PRESIDENT. JAIIME MADRID 2927 SE 5TH AVE CAPE CORAL FL 33904</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>V.P. MIRIAM MADRID 2927 SE 5TH AVE CAPE CORAL FL 33904</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: *  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>04/10/06</b> Daytime Phone # <b>(239) 458-4479</b>		