2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000127608

207 INVERNESS RD

VENICE, FL 34292 US

Address:

City-St-Zip:

FILED Feb 14, 2005 Secretary of State

Entity Name: ORIENTAL FOOD & GIFT MART, INC.					
Current Pr	incipal Place	of Business:	New Principal Place of	Business:	
2234 GULF SARASOTA	GATE DR A, FL 34231	US			
Current Ma	ailing Address	::	New Mailing Address:		
2234 GULF SARASOTA	GATE DR A, FL 34231	US			
FEI Number: 55-0809182		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
ADAM, KO CHA 207 INVERNESS RD VENICE, FL 34292 US			ADAM, KO CHA 2234 GULF GATE DR SARASOTA, FL 34231	US	
The above in the State		ubmits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE: KO CHA ADAM				02/14/2005	
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () I ADAM, KO CHA 207 INVERNESS VENICE, FL 342		Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () I ADAM, KO CHA 207 INVERNESS VENICE, FL 342		Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name:	TRES () I ADAM, KO CHA	Delete	Title: (Name:) Change () Addition	

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 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.

Address:

City-St-Zip:

SIGNATURE: KO CHA ADAM P 02/14/2005