

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000022530

FILED
Jul 21, 2008
Secretary of State**Entity Name:** FIRST FLORIDA CHICKEN, INC.**Current Principal Place of Business:**7300 NORTH KENDALL DRIVE
SUITE 521
MIAMI, FL 331567840 US**New Principal Place of Business:****Current Mailing Address:**7300 NORTH KENDALL DRIVE
SUITE 521
MIAMI, FL 331567840 US**New Mailing Address:****FEI Number:** 11-3683080**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**AMOROS, ALBERTO
7300 NORTH KENDALL DRIVE
SUITE 521
MIAMI, FL 331567840 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WU WONG, ARNOLD H
Address: AV JAVIER PRADO - OESTE # 595
City-St-Zip: LIMA 17, PERU, - - -

Title: DVP () Delete
Name: DE BRACAMONTE GALVEZ, CARLOS
Address: 19495 BISCAYNE BLVD, SUITE 302
City-St-Zip: MIAMI, FL 331802319 US

Title: GM () Delete
Name: RECHARTE ALFARO, CESAR
Address: 2312 PONCE DE LEON BOULEVARD
City-St-Zip: CORAL GABLES, FL 33134 US

Title: S (X) Delete
Name: AMOROS, ALBERTO
Address: 7300 NORTH KENDALL DRIVE, SUITE 521
City-St-Zip: MIAMI, FL 331567840 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: GM (X) Change () Addition
Name: RECHARTE ALFARO, CESAR
Address: 2312 PONCE DE LEON BOULEVARD
City-St-Zip: CORAL GABLES, FL 33134 US

Title: S (X) Change () Addition
Name: AMOROS, ALBERTO
Address: 7300 NORTH KENDALL DRIVE, SUITE 521
City-St-Zip: MIAMI, FL 331567840 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALBERTO AMOROS

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07/21/2008

Electronic Signature of Signing Officer or Director

Date