## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 02, 2005 8:00 am Secretary of State

1. Entity Nam	MENT # P03000026 TON FOOD BAZAAR COR				05-02-2005	5 90431 0	01 ***158	3.75			
Principal Place	e of Business	Mailing Address				•					
2004 14TH STREET WEST 2			2004 14TH STREET WEST BRADENTON, FL 34205								
Principal Place of Business     3. Mailing Address											
2. Findpairiace of business					1 IBB  UB  L   :	EUITH IIIN ABNI AANN A	BIN DELIG KELE E	LLJU L(8.)) U BIUI ULI:			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04202005	Chg-P	CR2E	034 (10/03)			
City & State		City & State			4. FEI Numbe 81-0601				plied For t Applicable		
Zip	Country	Zip	Country		-	of Status Desired	XX	\$8.75 Add	itional		
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New	Registered	•			
COLECE	PLITTEDA DA		Name	Name							
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST.			Street A	Street Address (P.O. Box Number is Not Acceptable)							
4TH FLOO MIAMI, FL			<u> </u>								
, i			City				FL	Zip Code	•		
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  Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
FILE NOWILL FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees											
10.	OFFICERS AND	DIRECTORS	11.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/	CHANGES TO OF					
NAME STREET ADDRESS CITY-ST-ZIP	PD DIAZ, RAFAEL JR. 2004 14TH STREET WEST BRADENTON, FL 34205	☐ Delete	name Street address	43 H	, RAFAEL UMMINGBI YN, NY 1	RD DRIVE		XIXI Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DIAZ, FRANCISCO 2004 14TH STREET WEST BRADENTON, FL 34205	☐ Delete	TITLE NAME STREET ADDRESS	SD DIAZ 7 TA	FRANCI PPENIOWN			XXX Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	C Doicte	TITLE NAME STREET ADDRESS CITY-ST-ZIP				·	☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		140 07/01/	) Shaida Gara		☐ Change	Addition		

12. I hereby certify that the information supplied with this filing does not qualify 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 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:		-RAFAEL DIAZ,	JR	(941) 747-0225
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #