

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000042424

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: S & A SPECIAL FOOD, CORP.

## Current Principal Place of Business:

11402 NW 41 STREET  
# 105  
DORAL, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

11402 NW 41 STREET  
# 105  
DORAL, FL 33178

## New Mailing Address:

FEI Number: 56-2343394

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ABRAMSON, EDWARD J ESQ  
7270 NW 12TH STREET STE 580  
MIAMI, FL 33126 US

## Name and Address of New Registered Agent:

DIAZ, ALBERY  
11402 NW 41 STREET # 105  
DORAL, FL 33178 US

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: ALBERY DIAZ

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: ALVARADO, ELBA R  
Address: 11402 NW 41 STREET SUITE # 105  
City-St-Zip: DORAL, FL 33178

Title: DV ( ) Delete  
Name: DIAZ, ALBERY C  
Address: 11402 NW 41 STREET SUITE # 105  
City-St-Zip: DORAL, FL 33178

Title: DS ( ) Delete  
Name: SULBARAN, MANUEL J  
Address: 11402 NW 41 STREET SUITE # 105  
City-St-Zip: DORAL, FL 33178

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ALBERY DIAZ

DV

04/29/2009

Electronic Signature of Signing Officer or Director

Date