2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005
Secretary of State

DOCUMENT# P03000064832

Entity Name: CONTROLLED CARB GOURMET, INC.

Current Principal Place of Business:

16420 NE 35 AVE
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

1905 N.E 154 ST
NORTH MIAMI, FL 33162

Current Mailing Address:

16420 NE 35 AVE
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

3404 N.E 167 ST
NORTH MIAMI BEACH, FL 33160

FEI Number: 20-0039890 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KEYNAN, HADASSAH
16420 NE 35 AVE
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

KEYNAN, HADASSAH
3404 N.E 167 ST.
NORTH MIAMI BEACH, FL 33160 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: 01/10/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: KEYNAN, HADASSAH
Address: 16420 NE 35 AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: DV ( ) Delete
Name: KEYNAN, JACOB
Address: 16420 NE 35 AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: KEYNAN, HADASSAH
Address: 3404 N.E 167 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: DV (X) Change ( ) Addition
Name: KEYNAN, JACOB
Address: 3404 N.E 167 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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.

SIGNATURE: JACOB KEYNAN DV 01/10/2005
Electronic Signature of Signing Officer or Director — Date