

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jun 01, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90377 001 \*\*\*300.00

66425367



MOORE CR2E034 (11/03)

<b>DOCUMENT # P03000083181</b>					
1. Entity Name <b>NATURAL CHICKEN PLUS, INC.</b>					
Principal Place of Business <b>7394 NW 8 ST MIAMI FL 33126</b>			Mailing Address <b>7394 NW 8 ST MIAMI FL 33126</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number				Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>SPIEGEL &amp; UTRERA, P.A.</b> <b>1840 SW 22ND ST.</b> <b>4TH FLOOR</b> <b>MIAMI FL 33145</b>			Name <b>GHANDOUR HUSSEIN</b>		
			Street Address (P.O. Box Number is Not Acceptable)		
			<b>7394 NW 8TH ST</b>		
			City <b>MIAMI</b> FL <b>33126</b>		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PSTD <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>GHANDOUR, HUSSEIN M</b>		NAME		
STREET ADDRESS	<b>7394 NW 8 ST</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>MIAMI FL 33126</b>		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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:			Date: <b>4/26/04</b> Daytime Phone #: <b>305-266-1038</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		

Attachment

06425367

**NATURAL CHICKEN PLUS**

7394 NW 8<sup>th</sup> Street  
Miami, FL 33126  
**305.266.1038** Phone  
786.200.3250 Cell  
305.266.1039 Fax

May 27, 2004

To: DIVISION OF CORPORATION  
(Annual Report Section)

Ref: LETTER # P03000083181

Dear Sir,

An (FEI) number was never applied for, This corporation was never active in any business doing, since this corporation was established the project was put on hold and no activities took place whatsoever therefor I don't want to have any further expenses and time losing.

**I wish to cancel this corporation and wish to receive a refund for the filling fee I sent  
Amount of \$150.00**

If you have any questions you can reach me anytime Mon thru Fri 10:00AM to 1:00PM /  
2:00PM to 4:30PM

Sincerely,

Hussein Ghandour

