## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 19, 2006 08:00 AM **Secretary of State** DOCUMENT # P03000088528 BARRETT FOOD SERVICE, INC. Principal Place of Business Mailing Address 3285 S W 2 ST 3285 S W 2 ST DEERFIELD BCH, FL 33442 DEERFIELD BCH, FL 33442 03252006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 35-2211792 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARRETT, A JEAN DO NOT WRITE 3285 S W 2 ST DEERFIELD BCH, FL 33442 IN THIS SPACE 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. Sonature, typed or printed name of registered agent and tipe if applicable. CATE (NOTE: Repistered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will bo \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME BARRETT, A JEAN UUU0008520062 STREET ADDRESS 3285 S W 2 ST CITY-ST-DP DEERFIELD BCH, FL 33442 05/02/06-800**8**0-011 150.00 HILE NAM STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ACCIRCISS DO NOT WRITE Caly-ST-ZP IN THIS SPACE nn s NAM( STREET ADDRESS CHY-ST-EP une NAME

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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:

STREET ADDRESS CITY-ST-ZIP DILE MAME STREET ADDRESS DITY-ST-ZP

**FILED**