## 2005 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Jan 26, 2005 08:00 AM **Secretary of State** DOCUMENT # P03000142577 NS NORTHWEST QUALITY MEAT, INC. Principal Place of Business Mailing Address 14025 NW 27TH AVENUE 14025 NW 27TH AVENUE MIAMI, FL 33014 MIAMI, FL 33014 01172005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0442478 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TORRES, JOSE G 8502 NW 198TH TERR DO NOT WRITE MIAMI, FL, FL 33015 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. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE TORRES, NORMA STREET ADDRESS 14025 NW 27TH AVENUE U00000136672 01/26/05-80078-008 150.00 CITY-ST-ZIP MIAMI, FL 33014 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ARDRESS 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, Uturther 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:

TITLE NAME STREET ADDRESS

01/17/2005

(305) 688-7340

Date

Daytime Phone &