2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2008
Secretary of State

DOCUMENT# P04000015034

Entity Name: BRIDGE'S FOODS CORP.

Current Principal Place of Business:

16501 BLATT BLVE
SUITE 104
WESTON, FL 33326

New Principal Place of Business:

16501 BLATT BLVD
SUITE 104
WESTON, FL 33326

Current Mailing Address:

16501 BLATT BLVE
SUITE 104
WESTON, FL 33326

New Mailing Address:

16501 BLATT BLVD
SUITE 104
WESTON, FL 33326

FEI Number: 84-1634989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PUENTES, MAURICIO
16501 BLATT BLVD
SUITE 104
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: PUENTES, MAURICIO
Address: 16501 BLATT BLVD SUIET 104
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: PUENTES, MAURICIO
Address: 16501 BLATT BLVD SUITE 104
City-St-Zip: WESTON, FL 33326

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: MAURICIO PUENTES P 07/21/2008

Electronic Signature of Signing Officer or Director — Date