2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000034767

Address:

City-St-Zip:

562 NORTH MAC EWEN DRIVE

OSPREY, FL 34229

FILED Jul 03, 2006 Secretary of State

Entity Name: EL GRECO FAMILY FOODS, INC. **Current Principal Place of Business: New Principal Place of Business:** 562 NORTH MAC EWEN DRIVE OSPREY, FL 34229 **Current Mailing Address: New Mailing Address:** 562 NORTH MAC EWEN DRIVE OSPREY, FL 34229 FEI Number: 20-0752000 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PREWETT, DANIEL L DOERR, KENNETH 240 S. PÍNEAPPLE AVE., 10TH FL 5777 BENEVA ROAD SOUTH OSPREY, FL 34236 SARASOTA, FL 34242 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: KENNETH D. DOERR 07/03/2006 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SOUBLIS, GEORGE X Name: Name: 562 NORTH MAC EWEN DRIVE Address: Address: City-St-Zip: OSPREY, FL 34229 City-St-Zip: Title: Title: () Delete () Change () Addition Name: SOUBLIS, PAULENE X Name: 562 NORTH MAC EWEN DRIVE Address: Address: OSPREY, FL 34229 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition CORCORAN, PANAYIOTA S Name: Name: 562 NORTH MAC EWEN DRIVE Address: Address: City-St-Zip: OSPREY, FL 34229 City-St-Zip: Title: () Delete Title: () Change () Addition SYROS, ELEFTHERIA S Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: PANAYIOTA CORCORAN D 07/03/2006