

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051113

Entity Name: SACRED INKA'S FOOD, INC.

FILED  
Jan 22, 2007  
Secretary of State

## Current Principal Place of Business:

4500 SW 135 AV  
MIAMI, FL 33175

## New Principal Place of Business:

5590 LAKESIDE DR  
101  
MARGATE, FL 33066

## Current Mailing Address:

4500 SW 135 AV  
MIAMI, FL 33175

## New Mailing Address:

5590 LAKESIDE DR  
101  
MARGATE, FL 33066

FEI Number: 20-0885309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZUNIGA, CARMEN L MRS  
4500 SW 135 AV  
MIAMI, FL 33175 US

## Name and Address of New Registered Agent:

ZUNIGA, CARMEN L MRS  
5590 LAKESIDE DR  
101  
MARGATE, FL 33066 US

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:

01/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ZUNIGA ORTEGA, CARMEN LUISA  
Address: 4500 SW 135 AV  
City-St-Zip: MIAMI, FL 33175

Title: V ( ) Delete  
Name: ZUNIGA GALDOS, WALTER LUIS  
Address: 4500 SW 135 AV  
City-St-Zip: MIAMI, FL 33175

Title: D ( ) Delete  
Name: ZUNIGA ORTEGA, MARIA CECILIA  
Address: 4500 SW 135 AV  
City-St-Zip: MIAMI, FL 33175

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ZUNIGA ORTEGA, CARMEN LUISA  
Address: 5590 LAKESIDE DR 101  
City-St-Zip: MARGATE, FL 33066

Title: V (X) Change ( ) Addition  
Name: ZUNIGA GALDOS, WALTER LUIS  
Address: 5590 LAKESIDE DR 101  
City-St-Zip: MARGATE, FL 33066

Title: D (X) Change ( ) Addition  
Name: ZUNIGA ORTEGA, MARIA CECILIA  
Address: 5590 LAKESIDE DR 101  
City-St-Zip: MARGATE, FL 33066

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.

SIGNATURE: CARMEN ZUNIGA

P

01/22/2007

Electronic Signature of Signing Officer or Director

Date