03/13/2006 18:52 9047212643 STEWART

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006 8:00 am
Secretary of State
03-23-2006 90003 038 ***150.00

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1. Entity Name
VISHAL FOODS OF MANDARIN, INC.

Principal Place of Business	Mailing Address
9802-14 BAYMEADOWS RD JACKSONVILLE, FL 32256	9802-14 BAYMEADOWS RD JACKSONVILLE, FL 32256

03132006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
10950 SAN JOSE BLVD	992 STEEPLECHASE LN
Suite, Apt. #, etc: 13	Suite, Apt. #, etc:
City & State: JACKSONVILLE FL	City & State: ORANGE PARK FL
Zip: 32223 Country: US	Zip: 32065 Country: US

4. FEI Number: 51-0508768 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MAISURIA, NARESHA 9802-14 BAYMEADOWS RD JACKSONVILLE, FL 32256	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing)

FILE NOW!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAISURIA, NARESH 6824 HARPERS GLEN CT JACKSONVILLE, FL 32256	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAEK, KWAN H 13215 HARTWELL DR JACKSONVILLE, FL 32225	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VILLANUEVA, JOHN G. R 992 STEEPLE CHASE LN ORANGE PARK FL 32065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VILLANUEVA, LUCILLEE D 992 STEEPLECHASE LN ORANGE PARK, FL 32065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 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: X: John V. Maisuria JOHN G.R. VILLANUEVA 3/13/06 904-982-9467
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR Date Daytime Phone #

Lucillee Villanueva LUCILLEE D. VILLANUEVA 3/13/06 - 904-349-8595