

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000084864

Entity Name: ST. CLOUD FOOD, INC.

FILED
Mar 16, 2009
Secretary of State

Current Principal Place of Business:

718 13TH STREET
ST CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

500 STATE ROAD 436
STE 2022
CASSELBERRY, FL 32707

New Mailing Address:

708 SUNCREST LOOP
#102
CASSELBERRY, FL 32707 US

FEI Number: 20-1178699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISLAM, MD T
500 STATE RD. 436, STE. 2016
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

ISLAM, MOHAMMED T
708 SUNCREST LOOP
SUITE 102
CASSELBERRY, FL 32707 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: MOHAMMED T. ISLAM

03/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TS () Delete
Name: BHUIYAN, SHAIKUL
Address: 500 STATE RD 436, STE. 2022
City-St-Zip: CASSELBERRY, FL 32707

Title: VP (X) Delete
Name: HOSSAIN, MOHAMMED
Address: 248 MAGNOLIA PARK TRAIL
City-St-Zip: SANFORD, FL 32773

Title: P () Delete
Name: ISLAM, MD T
Address: 708 SUNCREST LOOP # 102
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ISLAM, MOHAMMED T
Address: 708 SUNCREST LOOP, #102
City-St-Zip: CASSELBERRY, FL 32707 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: ISLAM, MD T
Address: 708 SUNCREST LOOP, # 102
City-St-Zip: CASSELBERRY, FL 32707 US

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: MOHAMMED T. ISLAM

PSTD

03/16/2009

Electronic Signature of Signing Officer or Director

Date