

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000116301

Entity Name: POCKET CHEFF, INC.

FILED  
Jan 10, 2005  
Secretary of State

## Current Principal Place of Business:

4747 COLLINS AVENUE #507  
MIAMI BEACH, FL 33140

## New Principal Place of Business:

## Current Mailing Address:

701 BRICKELL AVE  
SUITE 3000  
MIAMI, FL 33131

## New Mailing Address:

4747 COLLINS AVENUE #507  
MIAMI BEACH, FL 33140

FEI Number: 20-1470475

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION  
701 BRICKELL AVE SUITE 3000  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

AMARAL, EVALDO B  
11869 SW 43RD COURT  
DAVIE, FL 33330 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: EVALDO B. AMARAL

01/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Change (X) Addition  
Name: ALLIANI, SEBASTIAN  
Address: 4747 COLLINS AVENUE # 507  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP ( ) Change (X) Addition  
Name: FREIBERG, ERNESTO  
Address: 3625 NW 82ND AVENUE # 305  
City-St-Zip: MIAMI, FL 33166

Title: SEC ( ) Change (X) Addition  
Name: YELPEZ, GUILLERMO  
Address: 3625 NW 82ND AVENUE # 305  
City-St-Zip: MIAMI, FL 33166

Title: TRE ( ) Change (X) Addition  
Name: AMARAL, EVALDO B  
Address: 11869 SW 43RD COURT  
City-St-Zip: DAVIE, FL 33330

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EVALDO B AMARAL

TRE

01/10/2005

Electronic Signature of Signing Officer or Director

Date