

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000116301

Entity Name: POCKET CHEFF, INC.

FILED
Feb 22, 2006
Secretary of State

Current Principal Place of Business:

4747 COLLINS AVENUE #507
MIAMI BEACH, FL 33140

New Principal Place of Business:

11869 SW 43RD COURT
DAVIE, FL 333301912 US

Current Mailing Address:

4747 COLLINS AVENUE #507
MIAMI BEACH, FL 33140

New Mailing Address:

11869 SW 43RD COURT
DAVIE, FL 333301912 US

FEI Number: 20-1470475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

AMARAL, EVALDO B
11869 SW 43RD COURT
DAVIE, FL 333301912 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:

02/22/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: EVALDO B. AMARAL

TRE

02/22/2006

Electronic Signature of Signing Officer or Director

Date