

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159829

Entity Name: MARY'S SOUL FOOD, INC.

FILED
Aug 10, 2005
Secretary of State

Current Principal Place of Business:

238 NW 14TH ST
MIAMI, FL 33136

New Principal Place of Business:

Current Mailing Address:

238 NW 14TH ST
MIAMI, FL 33136

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNIPES, ANGEL
238 NW 14TH ST
MIAMI, FL 33136 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: SNIPES, ANGEL
Address: 238 NW 14TH ST
City-St-Zip: MIAMI, FL 33136

Title: VT () Delete
Name: BOSWELL, TINA
Address: 238 NW 14TH ST
City-St-Zip: MIAMI, FL 33136

Title: D () Delete
Name: GRIFFIN, LATERICA
Address: 238 NW 14TH ST
City-St-Zip: MIAMI, FL 33136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VT (X) Change () Addition
Name: BETHEL, NIGEL
Address: 238 NW 14TH ST
City-St-Zip: MIAMI, FL 33136

Title: D (X) Change () Addition
Name: BETHEL, SAMONA
Address: 238 NW 14TH ST
City-St-Zip: MIAMI, FL 33136

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: ANGEL SNIPES

PS

08/10/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date