

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013696

FILED
Aug 08, 2006
Secretary of State

Entity Name: BEST QUALITY FOOD DISTRIBUTORS, INC.

Current Principal Place of Business:

7215 NW 41 STREET
BAY I
MIAMI, FL 33166

New Principal Place of Business:

1715 NW 79 AVENUE
DORAL, FL 33126 US

Current Mailing Address:

7215 NW 41 STREET
BAY I
MIAMI, FL 33166

New Mailing Address:

1715 NW 79 AVENUE
DORAL, FL 33126 US

FEI Number: 20-2240014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANAL, MIGUEL J
7215 NW 41 STREET
BAY I
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

CANAL, MIGUEL J
1715 NW 79 AVENUE
DORAL, FL 33126 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: MIGUEL J CANAL

08/08/2006

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: P () Delete
Name: IRAGORRI, AMPARO
Address: 7215 NW 41 STREET BAY I
City-St-Zip: MIAMI, FL 33166

Title: T () Delete
Name: IRAGORRI, REINALDO
Address: 7215 NW 41 STREET BAY I
City-St-Zip: MIAMI, FL 33166

Title: S () Delete
Name: CANAL, MIGUEL J
Address: 7215 NW 41 STREET BAY I
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: IRAGORRI, AMPARO
Address: 1715 NW 79 AVENUE
City-St-Zip: DORAL, FL 33126 US

Title: T (X) Change () Addition
Name: IRAGORRI, REINALDO
Address: 1715 NW 79 AVENUE
City-St-Zip: DORAL, FL 33126 US

Title: S (X) Change () Addition
Name: CANAL, MIGUEL J
Address: 1715 NW 79 AVENUE
City-St-Zip: DORAL, FL 33126 US

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: MIGUEL J CANAL

S

08/08/2006

Electronic Signature of Signing Officer or Director

Date