2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117675

Entity Name: MAINSTREAM FOODS, INC.

9134 NW 21ST STREET

CORAL SPRINGS, FL 33071 US

Address:

City-St-Zip:

FILED Apr 27, 2006 Secretary of State

•		 ,				
Current P	rincipal Place o	of Business:	New Princ	New Principal Place of Business:		
	21ST STREET PRINGS, FL 33(071 US	SUITE#7	T COMMERCIAL BL' ERDALE, FL 33319	VD. US	
Current M	lailing Address	::	New Mailii	New Mailing Address:		
	21ST STREET PRINGS, FL 33(071 US	SUITE#7	T COMMERCIAL BL' ERDALE, FL 33319	VD. US	
FEI Number:	20-3390697	FEI Number Applied For ()	FEI Number Not Appli	icable () Certifi	cate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
	NEIL V 21ST STREET PRINGS, FL 330	071 US				
	named entity su e of Florida.	ubmits this statement for the	purpose of changing it	s registered office or	r registered agent, or both,	
SIGNATUR	RE:					
	Electronic	c Signature of Registered Ac	gent		Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS	S AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PSD ()[JOSEPH, NEIL V 9134 NW 21ST S CORAL SPRINGS	STREET	Title: Name: Address: City-St-Zip:	()Change	e () Addition	
Title: Name: Address: City-St-Zip:	VP ()[CUELHO, DAVID 9134 NW 21ST S CORAL SPRINGS	STREET	Title: Name: Address: City-St-Zip:	VP (X) Change COELHO, DAVID 9134 NW 21ST STREE CORAL SPRINGS, FL		
Title: Name: Address: City-St-Zip:	VP ()E FOSTER, ROBEI 9134 NW 21ST S CORAL SPRINGS	STREET	Title: Name: Address: City-St-Zip:	()Change	e () Addition	
Title: Name:	T ()[FORBES, GLEN	Delete N	Title: Name:	() Change	e () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: NEIL JOSEPH PSD 04/27/2006