

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000120162

Entity Name: C & J CHOCOLATE DIVAS, INC.

FILED
Apr 08, 2006
Secretary of State

Current Principal Place of Business:

2840 TAYLOR STREET
SUITE 29
HOLLYWOOD, FL 33020

New Principal Place of Business:

323 ARAGON AVE
CORAL GABLES, FL 33134

Current Mailing Address:

2840 TAYLOR STREET
SUITE 29
HOLLYWOOD, FL 33020

New Mailing Address:

323 ARAGON AVE
CORAL GABLES, FL 33134

FEI Number: 20-3396188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEROW, JEFFREY S
4800 N. FEDERAL HIGHWAY
SUITE 307B
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

DUARTE, CARIDAD M
323 ARAGON AVE
CORAL GABLES, FL 33134 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: CARIDAD M DUARTE

04/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: DUARTE, CARIDAD
Address: 2840 TAYLOR STREET, SUITE 29
City-St-Zip: HOLLYWOOD, FL 33020

Title: VP,D () Delete
Name: PARDO, JENNY
Address: 2840 TAYLOR STREET, SUITE 29
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: DUARTE, CARIDAD
Address: 323 ARAGON AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: VP,D (X) Change () Addition
Name: PARDO, JENNY
Address: 323 ARAGON AVE
City-St-Zip: CORAL GABLES, FL 33134

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: CARIDAD M DUARTE

P,D

04/08/2006

Electronic Signature of Signing Officer or Director

Date