2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Aug 07, 2006 8:00 am Secretary of State

03-29-2006 90130 017 ***150.00

DOCUMENT # P05000131973 ALAMEDA GOURMET MARKET CORP. Principal Place of Business Mailing Address 66022751 2769 CORAL WAY 2769 CORAL WAY MIAMI, FL 33145 MIAMI, FL 33145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01232006 CR2E034 (11/05) Cha-P City & State City & State 4. FEI Number Applied For 20-3547237 Not Applicable Zip Country Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RODRIGUEZ, RICARDO M 2769 CORAL WAY Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33145 Zip Code nity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept instead egent. the obligations SIGNATURE (NOTE Registered Agent signalure required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THE ☐ Delete TITLE ☐ Change RODRIGUEZ, RICARDO M NAME NAME 2769 CORAL WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33145 CITY-ST-ZIP □ Detete ☐ Change ☐ Addition LOPEZ, JORGE O NAME NAME 2769 CORAL WAY STREET ADDRESS STREET ADDRESS CITY-ST-77P MIAMI, FL 33145 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE Oelete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TUTLE ☐ Delete TITLE Chance ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST- OP IIILE IME Oelete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 in changed, or on an attack play, with an address, with all other like empowered.