## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000144667

Entity Name: FRESH & FRENCH CORP

FILED Apr 19, 2007 Secretary of State

3802 PONCE DE LEON BLVD 2508 BISCAYNE BVD. CORAL GABLES, FL 33134 US MIAMI, FL 33137 US

Current Mailing Address: New Mailing Address:

5601 COLLINS AVENUE 2920 BIRD AVENUE

MIAMI BEACH, FL 33140 US SUITE 6

COCONUT GROVE, FL 33133 US

FEI Number: 16-1738200 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JODIN, NICOLAS M
5601 COLLINS AVENUE
2920 BIRD AVENUE

MIAMI BEACH, FL 33140 US SUITE 6
COCONUT GROVE, FL 33133 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: NICOLAS JODIN 04/19/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 NICOLAS, JODIN M
 Name:
 NICOLAS, JODIN M

 Address:
 5601 COLLINS AVENUE
 Address:
 2920 BIRD AVENUE, SUITE 6

 City-St-Zip:
 MIAMI BEACH, FL 33140 US
 City-St-Zip:
 COCONUT GROVE, FL 33133 US

Name: NICOLAS, GUILLEMET X Name: BERNARD, BARRILE X

Address: 3802 PONCE DE LEON BLVD Address: ROUTE DE BERRE, LES BAISSES
City-St-Zip: CORAL GABLES, FL 33134 US City-St-Zip: LANCON DE PROVENCE, FR 13680 FR

Title: ( ) Delete Title: S ( ) Change (X) Addition

Name: Name: OMINVEST,

Address: Address: CHEMIN DES FOURCHES
City-St-Zip: City-St-Zip: PEYPIN, SU 13124 FR

Title: ( ) Delete Title: VS ( ) Change (X) Addition Name: VICTORIA, NEWTON DUNN F MISS

 Address:
 Address:
 1041, 8 STREET, APPT 2

 City-St-Zip:
 City-St-Zip:
 MIAMI BEACH, FL 33139

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: NICOLAS JODIN P 04/19/2007