


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

08-07-2006 90040 043 \*\*\*150.00

<b>DOCUMENT # P05000153130</b>		
1. Entity Name BLUE COAST FOOD CORP.		

Principal Place of Business <del>225 NE 14 STREET</del> <del>SUITE 103</del> MIAMI, FL 33132 US	Mailing Address <del>13338 SW 9 TERR</del> <del>MIAMI, FL 33184</del> US
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50024358



2. Principal Place of Business 255 NE 14 ST	3. Mailing Address 255 NE 14 ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.

08022006 Chg-P CR2E034 (11/05)

City & State Miami FL	City & State Miami FL	4. FEI Number 20-3824346	Applied For <input type="checkbox"/> Not Applicable
Zip 33132	Country USA	Zip 33132	Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SALA, ERIC 13338 SW 9 TERR MIAMI, FL 33184		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.	
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SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SALA, ERIC 13338 SW 9 TERR MIAMI, FL 33184 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SALA, LILIANA 13338 SW 9 TERR MIAMI, FL 33184 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HOYOS, OSCAR 13338 SW 9 TERR MIAMI, FL 33184 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **08-02-06 305-579-9059**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

5002435-8

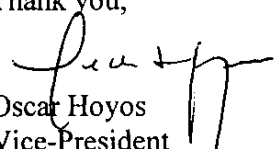
August 2, 2006

Re: Document # P05000153130  
Blue Coast Food Corp  
255 NE 14 Street  
Miami, FL 33132

To Whom It May Concern:

Please note that I moved locations and I never received any notice by mail of the deadline for the renewal of the corporation. I noticed that my corporation was over due after doing some research online. I am requesting for you to waive the 400 dollar penalty for its my first year with my corporation.

Thank you,

  
Oscar Hoyos  
Vice-President