2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 12, 2007 8:00 am Secretary of State **DOCUMENT # P05000162841** 04-12-2007 90021 033 ***150.00 1. Entity Name BOCA KITCHEN HOLDINGS, INC. Principal Place of Business Mailing Address 40057468 730 S POWERLINE ROAD 730 S POWERLINE ROAD SUITE I SUITE I DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04062007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 20-3941807 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAOI 15717 SUSAN J. BROTMAN, P.A. Street Address (P.O. Box Number is Not Acceptable) 2424 N FEDERAL HIGHWAY **SUITE 411** BOCA RATON, FL 33431 حاحا 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 SIGNATURE. (NOTE: Registered Agent signature required when reinstating) 9, Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE ☐ Addition TITLE ☐ Change CHOI, YEJIN NAME NAME STREET ADDRESS 730 S. POWERLINE ROAD, SUITE I STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH, FL 33442 CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZU CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addilion NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-74P Change ☐ Delete TITLE TITLE T Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this fitting 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.

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SIGNATURE:

FILED

954-428-4049