## **2008 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

DOCUMENT # P06000054325



## FILED May 15, 2008 8:00 am Secretary of State

| 1. Entity Name ORANGE BLOSSOM FOODS, INC   |  |                                | 05-15-2008 90030 004 ***150.00  |   |                                       |                            |                                    |                                     |                              |
|--|--|--------------------------------|---|---|---------------------------------------|----------------------------|------------------------------------|-------------------------------------|------------------------------|
| Principal Plac   | e of Business  | Mailing Address                | •   | -   |                                       |                            |                                    |                                     |                              |
| 7301 SOUTH ORANGE BLOSSOM TRAIL  |  | 7200 LAKE ELLENOR DRIVE        |   |   | 1                                     |                            |                                    |                                     |                              |
| ORLANDO, FL 32809  |  | 206                            |   |   |                                       |                            |                                    |                                     |                              |
|  |  | ORLANDO, F; 32809              |   |   | 11000000100                           | ANNE AIRIS AAIRI AARII İMI | III <b>BBIBI G</b> IIKI <b>B</b> K |                                     | IIISRI ILISKI                |
| 2 Principal P  | Place of Business - No P.O. Box #  | 3. Mailing Address             |   |   |                                       |                            |                                    |                                     |                              |
| 2. Trinopari   | lace of business - No F.O. Dox #   | 435 I FLORA VISTA DR           |   | QC AT   |                                       | BARIN BILLI KRIFI AKLII KA |                                    | EEO IIIIA IIEBI U                   |                              |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.            |   |   |                                       |                            |                                    |                                     |                              |
|  |  |                                |   |   | 04222008                              | Chg-P                      | CR2EC                              | )34 (12/06)                         |                              |
| City & State   |  | City & State ORLANDO, FL       |   |   | 4. FEI Number                         |                            |                                    | Āŗ                                  | oplied For                   |
|  |  |                                | •   | <b></b>   | 20-470                                | 5850                       | <u> </u>                           | No                                  | ot Applicable                |
| Zip  | Country  | Zip<br>3283子                   | Country   |   | 5. Certificate                        | of Status Desired          |                                    | \$8.75 Add                          | ditional                     |
|  | 6. Name and Address of Current   |                                | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   | <del></del>   | 7 Name and                            | Address of New F           | Pagistarad                         |                                     | ·o                           |
|  | or manage and made of Cartesia   | riogistoreu Agent              |   | lame  | 7. Name and                           | Address of New P           | zegisteleu :                       | Agent                               |                              |
| KAPADIA, ASHISH  |  |                                | <u> </u>  |   |                                       |                            |                                    |                                     |                              |
|  | RA VISTA DRIVE   | Street Addres                  |   |   | s (P.O. Box Number is Not Acceptable) |                            |                                    |                                     |                              |
| ORLANDO  | D, FL 32837  |                                |   |   |                                       |                            |                                    |                                     |                              |
| ]  | C. C   |                                |   |   |                                       |                            | _                                  | 1                                   |                              |
|  | The state of the s |                                | 10  | City  |                                       |                            | FL                                 | Zip Cod                             | e                            |
| 8. The above   | named entity-submits this statement fortions of registered agent.  | r the purpose of changing its  | registered c  | office or register  | ed agent, or bot                      | h, in the State of Flo     | orida. I am                        | familiar with,                      | and accept                   |
| ii,ie ooligat  | iona di registered agenti.   |                                |   |   |                                       |                            |                                    |                                     |                              |
| SIGNATURE.   | 19   |                                |   |   |                                       |                            |                                    |                                     |                              |
|  | Signature, typed or printed name of registered agent   | and title if applicable. (NOTE | E: Registered Age   | ent signature required  | when reinstating)                     | _                          | DATE                               |                                     |                              |
|  | E NOW! FFF IS \$450.00   | 9. Election Campai             | ian Financini   | a <b>\$5</b>  | .00 May Be                            |                            |                                    |                                     |                              |
|  | E NOW!!!  FEE IS \$150.00<br>ay 1, 2008 Fee will be \$550.0  |                                |   |   | ed to Fees                            |                            |                                    |                                     |                              |
|  |  |                                |   |   |                                       |                            |                                    |                                     | ı                            |
| 10.  | OFFICERS AND   | DIRECTORS                      | 11.   |   | ADDITIONS/                            | CHANGES TO GE              | ICERS AND                          | DIRECTOR                            | S IN 11                      |
| 10.  | OFFICERS AND   |                                | 11.   |   | ADDITIONS/                            | CHANGES TO OFF             | ICERS AND                          |                                     |                              |
|  | r  | DIRECTORS Delete               | 11.<br>TITLE<br>NAME  |   | ADDITIONS/                            | CHANGES TO OFF             | ICERS AND                          | DIRECTOR  Change                    | S IN 11                      |
| TITLE<br>NAME<br>STREET ADDRESS  | P S<br>KAPADIA, ASHISH<br>4351 FLORA VISTA DRIVE   |                                | TITLE   | DDRESS  | ADDITIONS/                            | CHANGES TO OFF             | ICERS AND                          |                                     |                              |
| TITLE<br>NAME  | P S<br>KAPADIA, ASHISH   |                                | TITLE<br>NAME   |   | ADDITIONS/                            | CHANGES TO OFF             | ICERS AND                          |                                     |                              |
| TITLE<br>NAME<br>STREET ADDRESS  | P S<br>KAPADIA, ASHISH<br>4351 FLORA VISTA DRIVE<br>ORLANDO, FL 32837<br>VP T  |                                | TITLE<br>NAME<br>STREET AL  |   | ADDITIONS/                            | CHANGES TO OFF             | ICERS AND                          |                                     |                              |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | P S<br>KAPADIA, ASHISH<br>4351 FLORA VISTA DRIVE<br>ORLANDO, FL 32837<br>VP T<br>SHAH, DHIMANT   | ☐ Delete                       | TITLE NAME STREET AD CITY-ST- TITLE NAME  | 2IP   | ADDITIONS/                            | CHANGES TO OFF             | FICERS AND                         | Change                              | Addition                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | P S<br>KAPADIA, ASHISH<br>4351 FLORA VISTA DRIVE<br>ORLANDO, FL 32837<br>VP T<br>SHAH, DHIMANT<br>168 OAK GROVE CIRCLE   | ☐ Delete                       | TITLE NAME STREET AD CITY-ST- TITLE NAME STREET AD  | 21P<br>DORESS   | ADDITIONS/                            | CHANGES TO OFF             | ICERS AND                          | Change                              | Addition                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | P S<br>KAPADIA, ASHISH<br>4351 FLORA VISTA DRIVE<br>ORLANDO, FL 32837<br>VP T<br>SHAH, DHIMANT   | Delete                         | TITLE NAME STREET AL CITY-ST- TITLE NAME STREET AL CITY-ST-   | 21P<br>DORESS   | ADDITIONS/                            | CHANGES TO OFF             | ICERS AND                          | ☐ Change                            | Addition                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  | P S<br>KAPADIA, ASHISH<br>4351 FLORA VISTA DRIVE<br>ORLANDO, FL 32837<br>VP T<br>SHAH, DHIMANT<br>168 OAK GROVE CIRCLE   | ☐ Delete                       | TITLE NAME STREET AL CITY-ST- TITLE NAME STREET AL CITY-ST-   | 21P<br>DORESS   | ADDITIONS/                            | CHANGES TO OFF             | ICERS AND                          | Change                              | Addition                     |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | P S<br>KAPADIA, ASHISH<br>4351 FLORA VISTA DRIVE<br>ORLANDO, FL 32837<br>VP T<br>SHAH, DHIMANT<br>168 OAK GROVE CIRCLE   | Delete                         | TITLE NAME STREET AL CITY-ST- TITLE NAME STREET AL CITY-ST- TITLE NAME STREET AL CITY-ST-   | DORESS ZIP  | ADDITIONS/                            | CHANGES TO OFF             | ICERS AND                          | ☐ Change                            | Addition                     |
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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.

ASHISH KAPADIA

04/22/08