

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000093707

Entity Name: MIZNER SALADS, INC

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

12347 NW 10TH DR
CORAL SPRINGS, FL 33073

New Principal Place of Business:

7737 N> UNIVERSITY DRIVE
TAMARAC, FL 33321

Current Mailing Address:

12347 NW 10TH DR
CORAL SPRINGS, FL 33073

New Mailing Address:

7737 N. UNIVERSITY DRIVE
TAMARAC, FL 33321

FEI Number: 20-5216564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANIAR, RAJU
7737 N UNIVERSITY DRIVE
#201
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LAKHANI, ARIF
Address: 12347 NW 10TH DR
City-St-Zip: CORAL SPRINGS, FL 33073

Title: OD () Delete
Name: LAKHANI, BHADURALI
Address: 12347 NW 10TH DR
City-St-Zip: CORAL SPRINGS, FL 33073

Title: OD () Delete
Name: KASSIM, NURRUDIN
Address: 12347 NW 10TH DR
City-St-Zip: CORAL SPRINGS, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LAKHANI, ARIF
Address: 1146 N UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33073

Title: OD (X) Change () Addition
Name: LAKHANI, BHADURALI
Address: 1146 N. UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33073

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ARIF

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date