

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000133553

Entity Name: NICHE'S FOOD INC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

3612 SHORELINE DRIVE
TALLAHASSEE, FL 32305

New Principal Place of Business:

Current Mailing Address:

3612 SHORELINE DRIVE
TALLAHASSEE, FL 32305

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRAZIER, JAMAI OII
1819 W. PENSACOLA ST.
APT A-1
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

FRAZIER, JAMAI OII
3612 SHORELINE DRIVE
TALLAHASSEE, FL 32305 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: JAMAI OII FRAZIER

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: FRANKLIN, KIMANI
Address: 3612 SHORELINE DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

Title: CO () Delete
Name: FRANKLIN, KIMANI
Address: 1819 W. PENSACOLA ST. APT. -1
City-St-Zip: TALLAHASSEE, FL 32304

Title: CEO () Delete
Name: FRAZIER, JAMAI OII
Address: 3612 SHORELINE DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

Title: CO () Delete
Name: FRAZIER, JAMAI OII
Address: 1819 W. PENSACOLA ST. APT. -1
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CO (X) Change () Addition
Name: FRANKLIN, KIMANI
Address: 3612 SHORELINE DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

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

Title: CO (X) Change () Addition
Name: FRAZIER, JAMAI OII
Address: 3612 SHORELINE DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

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: JAMAI OII FRAZIER

CEO

04/30/2009

Electronic Signature of Signing Officer or Director

Date