

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000060575

Entity Name: ST. LUCIE FOOD CORP.

FILED  
Apr 24, 2008  
Secretary of State

## Current Principal Place of Business:

10105 SOUTH U.S. HIGHWAY I  
PORT ST. LUCIE, FL 34952 US

## New Principal Place of Business:

## Current Mailing Address:

10105 SOUTH U.S. HIGHWAY I  
PORT ST. LUCIE, FL 34952 US

## New Mailing Address:

FEI Number: 26-0839701      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

RAMIREZ, CESAR  
10105 SOUTH U.S. HIGHWAY I  
PORT ST. LUCIE, FL 34952 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: P ( ) Delete  
Name: RAMIREZ, CESAR  
Address: 10105 SOUTH U.S. HIGHWAY I  
City-St-Zip: PORT ST. LUCIE, FL 34952 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RAMIREZ, CESAR  
Address: 3 TARYN COURT  
City-St-Zip: WOODCLIFF LAKES, NJ 07675 US

Title: SD ( ) Change (X) Addition  
Name: MEREJO, LUIS  
Address: 1197 SW LIVE OAK COVE  
City-St-Zip: PORT ST. LUCIE, FL 34986 US

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: CESAR RAMIREZ

PD

04/24/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date