

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000074699

**FILED**  
**Feb 09, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA FLAVORS AND CONCENTRATES, INC.

**Current Principal Place of Business:**

1726 AVE L  
RIVIERA BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

1726 AVE L  
RIVIERA BEACH, FL 33404

**New Mailing Address:**

**FEI Number:** 26-3504655

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

LENZ, DAVID R CPA  
9121 N. MILITARY TRAIL  
#222  
PALM BEACH GARDENS, FL 33410 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** HARDY, DIDIER  
**Address:** 205 SEDONA WAY  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418

**Title:** T  
**Name:** CIERI, GINA M  
**Address:** 205 SEDONA WAY  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418

**Title:** V  
**Name:** LATEEF UDDIN, MOHAMMED  
**Address:** 9022 ALISTER BLVD E APT 106  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418

I hereby 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 all other like empowered.

**SIGNATURE:** GINA CIERI

T

02/09/2011

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

\_\_\_\_\_  
Date