

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000067902

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: BACCHUS FINE FOODS LTD., INC.

## Current Principal Place of Business:

7631 SW 64TH COURT  
MIAMI, FL 33145 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 43-1133  
N/A  
MIAMI, FL 332431133 US

## New Mailing Address:

FEI Number: 65-0439906      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LUZARRAGA, JORGE  
7631 SW 64TH CT  
MIAMI, FL 33143 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: LUZARRAGA, JORGE  
Address: 7631 SW 64TH CT  
City-St-Zip: MIAMI, FL

Title: ST ( ) Delete  
Name: LUZARRAGA, SILVIA  
Address: 7631 S W 64TH COURT  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SILVIA LUZARRAGA

ST

04/28/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date