


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90176 040 ***158.75

DOCUMENT # P94000000274	
1. Entity Name GUIXENS FOOD GROUP, INC.	

Principal Place of Business 5800 NW 32ND COURT MIAMI, FL 33142 US	Mailing Address C/O IVAN A. GOMEZ, ESQ 601 BRICKELL KEY DRIVE SUITE 507 MIAMI, FL 33131
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DO NOT WRITE IN THIS SPACE



02072006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0457536	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent IAG CORPORATE SERVICES, INC 601 BRICKELL KEY DR STE 507 MIAMI, FL 33131

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUIXENS, JUAN J 5800 NW 32ND CT MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GUIXENS, JUAN J JR 5800 NW 32ND CT MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GUIXENS, ROSA C 5800 NW 32ND CT MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GUIXENS, MANUEL 5800 NW 32ND CT MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUIXENS, CHRISTINA L 5800 NW 32ND CT MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUIXENS, MAYRA C 5800 NW 32ND CT MIAMI, FL 33142

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Juan J. Guixens Jr VP* **2/26/2006** **305-371-9213**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Juan J. Guixens Jr President