

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000090164

FILED
Apr 02, 2004
Secretary of State

Entity Name: DELICIOUS FOODS OF FLORIDA, INC.

Current Principal Place of Business:

4660 W 4TH AVENUE
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

4660 W 4 AVENUE
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 65-0550876 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JULIA, ROBERT J
8042 NW 161 TERR
MIAMI, FL 33016 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: S () Delete
Name: IGLESIAS, ZELMA
Address: 8851 NW 153 TERR
City-St-Zip: MIAMI, FL 33018

Title: VD () Delete
Name: ESTEVE, HUMBERTO
Address: 901 PONCE DE LEON SUITE 304
City-St-Zip: CORAL GABLES, FL

Title: T () Delete
Name: VILARINO, MANUEL I
Address: 3805 SW 8TH ST
City-St-Zip: MIAMI, FL

Title: P () Delete
Name: ROBERT, JULIA
Address: 8042 NW 161 TERR
City-St-Zip: MIAMI, FL 33016

Title: D () Delete
Name: MARTINEZ, CESAR
Address: 4660 W 4TH AVE
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: IGLESIAS, ZELMA
Address: 8851 NW 153 TERR
City-St-Zip: MIAMI, FL 33018

Title: S (X) Change () Addition
Name: ESTEVE, HUMBERTO
Address: 901 PONCE DE LEON SUITE 304
City-St-Zip: CORAL GABLES, FL

Title: VD (X) Change () Addition
Name: VILARINO, MANUEL I
Address: 3805 SW 8TH ST
City-St-Zip: MIAMI, FL

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

Title: T (X) Change () Addition
Name: MARTINEZ, CESAR
Address: 4660 W 4TH AVE
City-St-Zip: HIALEAH, FL 33012

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 MARTINEZ

T

04/02/2004

Electronic Signature of Signing Officer or Director

Date