2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000011123

Entity Name: BAJA KITCHEN INC.

Name:

Address: City-St-Zip: DAHLEN, JUDITH K

622 RENAISSANCE POINTE BLVD #302

ALTAMONTE SPRINGS, FL 32714

FILED Apr 27, 2006 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|--|---|----------------|-------------------|---|--|--|
| 931 N STA STE 1145 | TE ROAD 434 | ŀ | | | | |
| | TE SPRINGS, | FL 32714 | US | | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| | TE ROAD 434 | ļ | | | | |
| STE 1145 ALTAMON | TE SPRINGS, | FL 32714 | US | | | |
| FEI Number: | 59-3302905 | FEI Number | Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of | Name and Address of New Registered Agent: | |
| 931 S.R. 43 SUITE 114 ALTAMON The above | 5 TE SPRINGS, named entity s | | | ourpose of changing its registere | d office or registered agent, or both, | |
| in the State | of Florida. | | | | | |
| SIGNATUR | | | | | | |
| Electronic Signature of Registered Agent | | | | ent | Date | |
| Election Can | npaign Financing | g Trust Fund C | contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PD () CHENAIL, GRE 929 OASIS CT APOPKA, FL | Delete GORY | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VD () DAHLEN, PRISO 37 BLUE STON CHADDS FORE | E CT. | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: | SD () | Delete | | Title: | () Change () Addition | |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GREGORY CHENAIL P 04/27/2006