

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000015688

Entity Name: KAZI FOODS OF FLORIDA, INC.

FILED
Jun 16, 2009
Secretary of State

Current Principal Place of Business:

171 NE 166TH STREET
MIAMI, FL 33162

New Principal Place of Business:

Current Mailing Address:

PO BOX 11239
A-1-A ESTATE THOMAS
ST THOMAS, VI 008014239

New Mailing Address:

FEI Number: 52-1920382 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
236 EAST 6TH AVE.
TALLAHASSEE, FL 32303 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: KAZI, ZUBAIR M
Address: PO BOX 11239
City-St-Zip: ST THOMAS, VI 00801

Title: CEO () Delete
Name: BURR, BRIAN C
Address: 3671 SUNSWEPT DRIVE
City-St-Zip: STUDIO CITY, CA 91604

Title: CFO () Delete
Name: COOK, MICHAEL J
Address: P.O. BOX 11239
City-St-Zip: ST THOMAS, VI 00801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: SHARON C VENSOR

Electronic Signature of Signing Officer or Director

TREA

06/16/2009

Date