

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000037186

Entity Name: VARIETY FOODS, INC.

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

5180 NW 12 AVE
FT. LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

5180 NW 12 AVE
FT. LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 65-0630794 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GENDICS, CHERYL
4020 GALT OCEAN DRIVE #810
FORT LAUDERDALE, FL 33308 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: D () Delete
Name: RALEY, LOUIS A
Address: 3750 N.E. 4TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33334

Title: D () Delete
Name: MIDYETTE, EUGENE
Address: 5180 N.W. 12 AVE.
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: V () Delete
Name: MROCZKOWSKI, EUGENE
Address: 6110 HARDING STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: V () Delete
Name: GENDICS, CHERYL
Address: 4020 GALT OCEAN DRIVE #810
City-St-Zip: FORT LAUDERDALE, FL 33308

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:

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: CHERYL GENDICS

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

_____ Date