2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000094573

FILED Oct 25, 2006 Secretary of State

	ne: SAR MIAMI	TOOD INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	FOOD INC. 07 AVE., #400 33172 US					
Current Mailing Address:			New Maili	New Mailing Address:		
7650 BIRCHMONT ROAD MARKHAM, ONTARIO L3R 6B9 CANADA,		MARKHAN	7650 BIRCHMONT ROAD MARKHAM, ONTARIO L3R 6B9 CANADA, ON 00000			
FEI Number:	65-0632435	FEI Number Applied For ()	FEI Number Not Appl	icable () Certific	ate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
		RVICES, INC. BLVD., SUITE 508				
The above in the State		bmits this statement for the pu	ırpose of changing i	ts registered office or	registered agent, or both,	
	of Florida. E:	·		ts registered office or	registered agent, or both,	
in the State	of Florida. E:	bmits this statement for the pu		ts registered office or	registered agent, or both, Date	
in the State SIGNATUR	of Florida. E:	Signature of Registered Ager	nt			
in the State SIGNATUR	of Florida. Electronic AND DIRECTO D () D PANG, ALEX	Signature of Registered Ager ORS: Pelete TO RICHMOND HILL	nt	IS/CHANGES TO OF	Date FICERS AND DIRECTORS: () Addition	
in the State SIGNATUR OFFICERS Title: Name: Address:	of Florida. Electronic AND DIRECTO D () D PANG, ALEX 9 HIGHBRIDGE R ONTARIO, CANAI	Signature of Registered Ager ORS: Pelete ED RICHMOND HILL DA, L4B 1Y2 Pelete	ADDITION Title: Name: Address:	IS/CHANGES TO OF VPD (X) Change BOB, LIANG 3582 ROCKY MEADOW FAIRFAX, VA 22033	Date FICERS AND DIRECTORS: () 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.

SIGNATURE: CHRISTINE KO PD 10/25/2006