2008 FOR PROFIT CORPORATION

Apr 18, 2008 08:00 A Secretary of State ANNUAL REPORT DOCUMENT # P96000035886 MILTON FOODS, INC. Principal Place of Business Mailing Address 6534 CAROLINE ST 1326 E LUMSDEN RD MILTON, FL 32570 BRANDON, FL 33511 US 04042008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3384575 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CURRY, CLIFTON C JR DO NOT WRITE 750 WEST LUMSDEN ROAD BRANDON, FL 33511 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U000000905225 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees ns/ni/n8-80044-010 150.00 OFFICERS AND DIRECTORS 10. TITLE KAZBOUR, TALAL NAME 1326 E. LUMSDEN RD STREET ADDRESS CITY-ST-ZIP BRANDON, FL 33511 TITLE NAME MARSHALL, ANDREW STREET ADDRESS 1326 E. LUMSDEN RD CITY-ST-ZIP BRANDON, FL 33511 TITLE MARSHALL, WILLIAM NAME STREET ADDRESS 1326 E. LUMSDEN RD DO NOT WRITE CITY-ST-ZIP BRANDON, FL 33511 IN THIS SPACE BURLEY, MITCHELL B NAME STREET ADDRESS 1326 E. LUMSDEN RD CITY-ST-ZIP BRANDON, FL 33511 TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all prior like empowered.

SIGNATURE: _

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED