

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000018553

FILED
Apr 30, 2009
Secretary of State

Entity Name: A & R FOOD CORPORATION

Current Principal Place of Business:

1564 N. WOODLAND BLVD.
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

1564 N. WOODLAND BLVD.
DELAND, FL 32720

New Mailing Address:

FEI Number: 59-3436275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARDILA, ALVARO
348 WESTCHESTER DR
DELAND, FL 32724 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: ARDILA, ALVARO
Address: 348 WESTCHESTER DR.
City-St-Zip: DELAND, FL 32724

Title: D () Delete
Name: ARDILA, ROSA
Address: 348 WESTCHESTER DR.
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ARDILA, ALVARO PRESIDE
Address: 348 WESTCHESTER DR.
City-St-Zip: DELAND, FL 32724

Title: D (X) Change () Addition
Name: ARDILA, ROSA M SECRET
Address: 348 WESTCHESTER DR.
City-St-Zip: DELAND, FL 32724

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: ALVARO ARDILA

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date