## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000072399

Entity Name: GOOD CHOICE VENTURES, INC.

PEMBROKE PINES, FL 33028

City-St-Zip:

FILED Mar 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business: 16699 NE 19TH AVENUE** NORTH MIAMI BCH, FL 33162 **Current Mailing Address: New Mailing Address: 16699 NE 19TH AVENUE** NORTH MIAMI BCH, FL 33162 FEI Number: 65-0776674 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FAWAZ, JOSEPH 2208 NE 123RD STREET NORTH MIAMI BCH, FL 33181 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **VPTS** ( ) Delete Title: () Change () Addition MOUKARZEL, ELIAS N Name: Name: 16508 NE 26TH AVE Address: Address: City-St-Zip: NORTH MIAMI BEACH, FL 33160 City-St-Zip: Title: PD Title: () Change () Addition () Delete Name: FAWAZ, JOSEPH Name: 16748 NW 8TH ST Address: 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: JOSEPH FAWAZ P 03/29/2009