

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000001177

**FILED**  
**Jan 10, 2006**  
**Secretary of State**

**Entity Name:** PERISHABLE FOOD CONSULTANTS, INC.

**Current Principal Place of Business:**

31 STAR ISLAND  
MIAMI, FL 33139

**New Principal Place of Business:**

31 STAR ISLAND  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

31 STAR ISLAND  
MIAMI, FL 33139

**New Mailing Address:**

31 STAR ISLAND  
MIAMI BEACH, FL 33139

**FEI Number:** 65-0804669

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JACOBSON, RONI  
31 STAR ISLAND  
MIAMI BEACH, FL 33139 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:** PSTD ( ) Delete  
**Name:** JACOBSON, RONI  
**Address:** 31 STAR ISLAND  
**City-St-Zip:** MIAMI BEACH, FL 33139

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PTD (X) Change ( ) Addition  
**Name:** JACOBSON, RONI  
**Address:** 31 STAR ISLAND  
**City-St-Zip:** MIAMI BEACH, FL 33139

**Title:** S ( ) Change (X) Addition  
**Name:** JACOBSON, SAMUEL  
**Address:** 31 STAR ISLAND  
**City-St-Zip:** MIAMI BEACH, FL 33139

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:** RONI JACOBSON

PTD

01/10/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date