2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000053850

Entity Name: NORTHEAST FOOD, INCORPORATED

FILED Dec 02, 2005 Secretary of State

Current Pi	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:		
1301 4TH / FT.LAUDE	AVE. RDALE, FL 3	33304				
Current M	ailing Addre	ss:	New Maili	New Mailing Address:		
1301 4TH / FT.LAUDE	AVE. RDALE, FL 3	33304				
FEI Number:	65-0936324	FEI Number Applied For()	FEI Number Not Appl	licable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
6570 W. A DELRAY B The above	OHAMMAD ATLANTIC AVE EACH, FL 33 named entity of Florida.	E. 3446 US	ourpose of changing it	ts registered office or registered agent, or both	,	
SIGNATUF						
01011/1101		nic Signature of Registered Age	ent	Date	-	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD (SOHID, MOHA 2801 FORSYT BOCA RATON	H AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	KHAN, RANA) Delete DELI, 6570 W. ATLANTIC AVE. CH, FL 33446	Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition UDDIN, NAZIM MD 47, COUNTRY LAKE CIRCLE BOYNTON BEACH, FL 33436		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MOHAMMED SOHID PD 12/02/2005