


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 19, 2007 8:00 am**  
**Secretary of State**

03-19-2007 90074 010 \*\*\*150.00

<b>DOCUMENT # P99000111718</b> 1. Entity Name <b>GOOD FOOD SERVICE, INC.</b>																													
Principal Place of Business <b>3944 WATERVIEW LOOP WINTER PARK, FL 32792</b>			Mailing Address <b>3944 WATERVIEW LOOP WINTER PARK, FL 32792</b>																										
2. Principal Place of Business - No P.O. Box # <b>6971 KENMURE DR</b> <small>Suite, Apt. #, etc.</small>			3. Mailing Address <b>6971 KENMURE DR</b> <small>Suite, Apt. #, etc.</small>																										
City & State <b>OVIEDO, FL</b> <small>Zip</small> <b>32765</b> <small>Country</small> <b>USA</b>			City & State <b>OVIEDO, FL</b> <small>Zip</small> <b>32765</b> <small>Country</small> <b>USA</b>																										
4. FEI Number <b>59-3620991</b>			Applied For <input type="checkbox"/> Not Applicable																										
5. Certificate of Status Desired <input type="checkbox"/>			<b>\$8.75</b> Additional Fee Required																										
6. Name and Address of Current Registered Agent  <b>YIN CHAN, SIU 3944 WATERVIEW LOOP WINTER PARK, FL 32792</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>6971 KENMURE DR</b> City <b>OVIEDO</b> <b>FL</b> Zip Code <b>32765</b>																										
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 <u><i>Siu Chan</i></u> <span style="float: right;">3-15-07</span> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																													
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees																									
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">P</td> <td style="width: 15%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td><b>YIN CHAN, SIU</b></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>3944 WATERVIEW LOOP</b></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td><b>WINTER PARK, FL 32792</b></td> <td></td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">X</td> <td style="width: 15%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td><b>6971 KENMURE DR</b></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>OVIEDO, FL 32765</b></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	P	<input type="checkbox"/> Delete	NAME	<b>YIN CHAN, SIU</b>		STREET ADDRESS	<b>3944 WATERVIEW LOOP</b>		CITY - ST - ZIP	<b>WINTER PARK, FL 32792</b>		TITLE	X	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	<b>6971 KENMURE DR</b>		STREET ADDRESS	<b>OVIEDO, FL 32765</b>		CITY - ST - ZIP		
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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 other like empowered.																													
SIGNATURE: <u><i>Siu Chan</i></u> <span style="float: right;">3-15-07</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																													

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