

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2006 08:00 AM
Secretary of State

DOCUMENT # S93863	
1. Entity Name INTERAMERICAS FOOD AND BEVERAGES, INC.	

Principal Place of Business 9195 BOGGY CREEK RD #8 ORLANDO, FL 32834 US	Mailing Address 9195 BOGGY CREEK RD #8 ORLANDO, FL 32834 US
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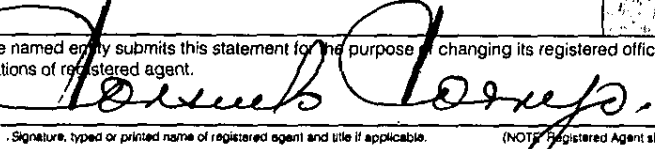


06302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0294884	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORNEJO, MIRYAN C 9195 BOGGY CREEK RD #8 ORLANDO, FL 32834	DO NOT WRITE IN THIS SPACE
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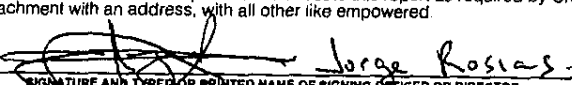
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))	DATE 06/30/06

FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CORNEJO, ALFONSO 9195 BOGGY CREEK RD ORLANDO, FL 32834
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CORNEJO, MIRYAN CONSELO 9195 BOGGY CREEK RD ORLANDO, FL 32834
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROSIAS, JORGE 9195 BOGGY CREEK RD SUITE #8 ORLANDO, FL 32824
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROSIAS, ERNESTO 9195 BOGGY CREEK RD SUITE #8 ORLANDO, FL 32824
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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1000000557854
07/03/06-80002-004-550.00

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:  (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)	DATE 06/30/06 (321) 303 8547 Daytime Phone #