

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V28320

FILED
Apr 30, 2007
Secretary of State

Entity Name: FLORIDA FOOD SUPPLY, INC.

Current Principal Place of Business:

1111 KANE CONCOURSE
STE 401
BAY HARBOR ISLAND, FL 33154 US

Current Mailing Address:

1111 KANE CONCOURSE
STE 401
BAY HARBOR ISLANDS, FL 33154 US

FEI Number: 65-0366367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAKOWITZ, ALAN
1111 KANE CONCOURSE
STE 401
BAY HARBOR ISLANDS, FL 33154 US

New Principal Place of Business:

1111 KANE CONCOURSE
STE 401F
BAY HARBOR ISLANDS, FL 33154 US

New Mailing Address:

1111 KANE CONCOURSE
STE 401F
BAY HARBOR ISLANDS, FL 33154 US

Name and Address of New Registered Agent:

SAKOWITZ, ALAN
1111 KANE CONCOURSE
STE 401F
BAY HARBOR ISLANDS, FL 33154 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: ALAN SAKOWITZ

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: SAKOWITZ, ROBERT
Address: 12841 SOUTH CALUSA CLUB DRIVE
City-St-Zip: MIAMI, FL 33186

Title: PS () Delete
Name: SAKOWITZ, ALAN
Address: 1111 KANE CONCOURSE STE 401
City-St-Zip: BAY HARBOR ISLAND, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PS (X) Change () Addition
Name: SAKOWITZ, ALAN
Address: 1111 KANE CONCOURSE STE 401F
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

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: ALAN SAKOWITZ

DVP

04/30/2007

Electronic Signature of Signing Officer or Director

Date