

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000046787

**Entity Name:** EINHORN FOOD, INC

**Current Principal Place of Business:**

P.O BOX 416652  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

P.O BOX 416652  
MIAMI BEACH, FL 33141 US

**FEI Number: 45-5316259**

**Certificate of Status Desired: No**

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

EINHORN, SHALOM  
5900 COLLINS AVENUE  
APT 1906  
MIAMI BEACH, FL 33140 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            P  
Name            EINHORN, SHALOM  
Address        5900 COLLINS AVENUE  
                  APT 1906  
City-State-Zip: MIAMI BEACH FL 33140

Title            VP  
Name            EINHORN, CARMEN K  
Address        5900 COLLINS AVENUE  
                  APT 1906  
City-State-Zip: MIAMI BEACH FL 33140

*I hereby 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 all other like empowered.*

**SIGNATURE: SHALOM EINHORN**

**P**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date