

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Martinez
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 24 AM 7:19

TALLAHASSEE, FLORIDA

DOCUMENT # 348513 (3)

1. Corporation Name
MOVSOVITZ & SONS OF FLORIDA, INC.

Principal Place of Business: 3100 HILTON STREET, P.O. BOX 41565, JACKSONVILLE FL 32203
Mailing Address: 7380 SAND LAKE ROAD, SUITE 410, ORLANDO FL 32819

2. Principal Place of Business: 21 3100 HILTON STREET, JACKSONVILLE FL 32203
2a. Mailing Address: 26 7380 SAND LAKE ROAD, SUITE 410, ORLANDO FL 32819
22. City & State: 27 Jacksonville FL
23. Zip: 24 32203, Country: 25 USA

3. Date of Incorporation (Original): 06/26/1969
3a. Date of Last Report: 03/04/1994
4. FEI Number: 59-1262727
5. Certificate of State: Desired \$8.75 Additional Fee Required
6. Election Campaign Financing: Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for enterprise tax under S. 190.04, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
STURGEON, BRIAN%ALBERT FISHER FOODS, INC.
7380 SAND LAKE ROAD
SUITE 410
ORLANDO FL 32819

10. Name and Address of New Registered Agent
81 Name: Larry H. Maurer
82 Street Address (P.O. Box Number is Not Applicable): 3100 Hilton Street
83 City: Jacksonville FL 85 Zip Code: 32203

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: SEE ATTACHED STATEMENT

12. OFFICERS AND DIRECTORS

TITLE	TS
NAME	STRUGEON, BRAIN
STREET ADDRESS	7380 SAND LAKE ROAD
CITY, ST, ZIP	ORLANDO FL
TITLE	P
NAME	MOVSOVITZ, LAWRENCE
STREET ADDRESS	7380 SAND LAKE ROAD
CITY, ST, ZIP	ORLANDO FL
TITLE	D
NAME	JOHNSON, RICHARD
STREET ADDRESS	7380 SAND LAKE ROAD
CITY, ST, ZIP	ORLANDO FL
TITLE	D
NAME	O'BOYLE, KEVIN
STREET ADDRESS	7380 SAND LAKE ROAD
CITY, ST, ZIP	ORLANDO FL
TITLE	S
NAME	NAPIER, ANDREA
STREET ADDRESS	7380 SAND LAKE ROAD
CITY, ST, ZIP	ORLANDO FL
TITLE	D
NAME	PIPPEN, LENNY
STREET ADDRESS	7380 SAND LAKE ROAD
CITY, ST, ZIP	ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (SEE 12)

11 NAME	D/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Lawrence Movsovitz	
13 STREET ADDRESS	P.O. 3100 Hilton Street	
14 CITY, ST, ZIP	Jacksonville, FL 32203	
21 NAME	S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Larry H. Maurer	
23 STREET ADDRESS	3100 Hilton Street	
24 CITY, ST, ZIP	Jacksonville, FL 32203	
31 NAME	Asst. Sec.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Bernadette M. Kruek	
33 STREET ADDRESS	15203 Dallas Parkway, #1250	
34 CITY, ST, ZIP	Dallas, TX 75248	
41 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		
51 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
61 NAME		
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

Handwritten: T.S. 3/24/95

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.04, Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made in person. I am an officer or director of this corporation or its owner or holder empowered to execute this report as required by Chapter 607, Florida Statutes, or that my name appears on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Bernadette M. Kruek Bernadette M. Kruek
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/95 214-387-2594