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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 641800 (8) MONFORT CORPORATION  Principal Place of Business Mailing Address								
Principal Place of Business 040 6TH AVENUE NORTH IAPLES FL 34102		1040 6TH AVENUE NORTH NAPLES FL 34102-5603						
					3. Date Incorporated or Qualified 10/18/1979	3a. Date of 09/13/1		eport
2. Principal Place of Business	ì	a. Mailing Address	***************************************		4. FEI Number		Ap	plied For
Suite, Apt. #, etc.	26	Suite, Apt. #, etc.			59-1947242	- \$1		t Applicable Additional
2	27	<b>-1</b>			5. Certificate of Status Desired		Fee Re	
City & State		City & State			6. Election Campaign Financing			May Be
2(p)	Country	7 <sub>IP</sub>	Counti	у	Trust Fund Contribution  8. This corporation has liability for	····	Added to	
4 25	29		30	·	Florida Statutes	] Yes 🔲 No	o	100.002,
	d Address of Current Reg	istered Agent	8	1 Name	10. Name and Address of New Re	gistered Ager	<u> </u>	
FORESMAN, W., F					Carrier			
1040 6TH AVE. NORTH NAPLES FL 34102				2 Street Ad	Address (P.O. Box Number is Not Acceptable)			
			8:	3	**************************************			
			8-	4 City	Assert Assert Assert	FL 85	Zip (	Code
agent. I am familiar with, a	and accept the obligations	of, Section 607.0505, F	lorida Statut	es.	orporation submits this statement for the pration's board of directors. I hereby acce	pt the appoint	nom us	registores
Signalure, typed or pr	inted name of registered agent and I	offe if applicable (NC	IE. Registered A	gent signature re	quired when reinstating)	DATE		
Stgnalurc, typed & p 12.	onted name of registered agent and I OFFICERS AND DIR	ECTORS	13.		quired when reinstaling) ADDITIONS/CHANGES TO OFFICE	CERS AND DIF		
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SIGNATURE:

SIGNATURE AND TYPED OR PROTECT NAME OF SIGNING OFFICER OR DIRECTOR

april 3 97 236.0252

**FILED** 

Apr 10 1997 8:00am

Secretary of State