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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham: Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # 690005

(4)

Principal Place 5450 FLAVOI POST OFFIC	IS FARMS, INC. B of Business R PICT ROAD	Mailing Address 5450 FLAVOR PICT ROA P O DRAWER 189 BOYNTON BCH FL 33425 US	-	3. Date incorporated or Qualified 06/12/1981	3a. Date of Las	t Report
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number	04/26/1	
21	and or Eddings	26		59-2106018	ļ	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.	75 Additional
22		27	···	5. Seriffede di Statos Desired	F	ee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	28	Country	Trust Fund Contribution		ded to Fees
24	25		30	8. This corporation has liability for Flonda Statutes	r intang ble tax undo. s -	rs 199.032,
	9. Name and Address of Current		T	10. Name and Address of New I	_	
			81 Name	Bois, William A.,	Jr	
	i, WILLAIM A JR		82 Street	Address (P.O. Box Number is Not Accepta 50 Flavor Pict Roa	ble)	
	AVOR PICT ROAD			50 Flavor Pict Roa	ď	
BOYNTO	ON BEACH FL 33437		83			
			84 City	ynton Beach	85	Zip Code
11 Pursuant I	to the provisions of Sections 607 0502	and 607 1508 Florida Statutos		pporation submits this statement for the pu	FL	33436
familiar wi	red agent, or both, in the State of Florid th, and accept the obligations of, Section	a Such change was authorized on 607.0505, Florida Statutes.	Thy the corporation's :	board of directors. Thereby accept the app IAM A. DUBOIS, JR.	contraent as register	3/96
12.	Signature. Specifor printed train e of regelement agent a OFFICERS ANE		Registered Agent signature re 13.	ADDITIONS/CHANGES TO OF	DA'E	TODGUNIA
TITLE	PD	DELFTE	1. 1 TILE	ADDITIONS CHANGES TO OF	Chang	e Addition
NAME	DUBOIS, WILLIAM A SR		1.2 NAME			TORS IN 12 P. Addition
STREET ADDRESS	3345 CHURCHILL DRIVE		1.3 STHEFT ADDRESS			2
CITY-ST-ZIP	BOYNTON BCH, FL 00000		1.4 City - ST - ZiP			
TITLE	SD	DELÉTÉ	2 1 TIT. E	PSD	☐ Chang	e 🔏 Addition
NAME	DUBOIS, WILLIAM A JR		2.2 NAME	DuBois, William A	, Jr.	_
STREET ADDRESS	921 SW 36TH AVE		23 STREET ADDRESS	921 S. W. 36th Av		
CITY-ST-ZIP	BOYNTON BCH, FL 00000		2.4 CITY-ST-ZIP	Boynton Beach, Fl	orida 3	3435
TITLE	TD	☐ DELETE	3 1 TITLE	VPTD		e 🛣 Addition
NAMÉ	DUBOIS, ROBERT		3.2 NAME	DuBois, Robert M.		
STREET ADDRESS	10679 SPICEWOOD TRAIL		3.3 STREET ADDRESS	10679 Spicewood T		
CITY-ST-ZIP TITLE	BOYNTON BCH, FL 00000	La berete	34 C:TY-\$T-7:P	Boynton Beach, Fl		3426
		☐ DELETE	4 1 TITLE		∐ Chang	e 🔲 Addition
NAME STREET ADDRESS	i de la companya de l		4.2 NAME			j
			4.3 STREET ADDRESS			ļ
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5. 1 TITLE		☐ Chang	e Addition
NAME		- Secrit	5.2 NAME		L_1 Griding	- Modition
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY ST-ZIP			
TITLE		☐ DELETE	6 1 TITLE		Chang	e Addition
NAME		-	6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY - ST - ZIP			6.4 CITY - ST - ZIP			

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 119.0/(3)(k). Florida Statutes. I further certify that the information indicated 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM A. DUBOIS, JR.

4/8/96

(407) 498-300**0**