2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

FILED
04 JUN 22 AM 9:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

DOCUMENT # A31570

1. Entity Name
SOUTHEAST FROZEN FOODS COMPANY, L.P., LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
18770 N.E. 6TH AVENUE MIAMI, FL 33179	18770 N.E. 6TH AVENUE MIAMI, FL 33179

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

06152004 Chg-LP CR2E003 (10/03) 6/22

4. FEI Number 65-0260984 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. $8,000,000.00

10. Amount of Capital Contributions in FLORIDA to date.

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P38030	STREET ADDRESS	
NAME	SOUTHEAST FROZEN FOODS CORPORATION		
STREET ADDRESS	667 MADISON AVENUE, 25TH FLOOR	CITY-ST-ZIP	400038740504 07/06/04--01032--004 **526.25
CITY-ST-ZIP	NEW YORK, NY 10021		
DOCUMENT #	S58631	STREET ADDRESS	
NAME	CORAL SPRINGS CONNECTION, INC.		
STREET ADDRESS	18770 N.E. 6TH AVE	CITY-ST-ZIP	
CITY-ST-ZIP	MIAMI, FL 33179		
DOCUMENT #		STREET ADDRESS	
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SOUTHEAST FROZEN FOODS CORPORATION, GENERAL PARTNER

SIGNATURE: Douglas W. Myers, Vice President 6/15/04 305-652-4622

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #