FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

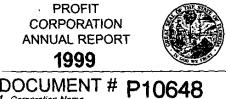
Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999

BURNS PHILP FOOD INC.

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90214 025 ***150.00



io Larkin Williams Ind CT 12 Sutter St 9th Fla Enton Mo 63026-2413 S	240 LARKIN WILLIAMS IND CT 222 SUTTER ST 9TH FLR FENTON MO 63026-2413 US			DO NOT WRITE IN THIS 3. Date incorporated or Qualified	SPAC	E		
Principal Place of Business	2a. Mailing Address			07/02/1986 4. FEI Number		Applied For		
Clo BURNS PhiLo TAX DEPt.	26 GO BURNS Anilo Foo	d	Inc.	22-2723920		Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Additional ee Required		
City & State FENTON, MO	City & State 28 FENTON, MO			Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees		
Zip Country 63026-2413 25 25A	Zip Cou	ntry (5		This corporation owes the current year Inter- Personal Property Tax.	ingible X Ye			
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent					
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD		81 82						
PLANTATION FL 33324		83						
		84	City		85	Zip Code		

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this 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.

						l l
SIGNATURE				equired when rejustating) DATE		{
12.	Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS	(NOTE: Re	gistered Agent signature n	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
nte I		DELETE	1.1 TITLE	7.00111011010111110210	☐ Change	Addition
AME I	WITTENAUER, STEVE		1.2 NAME		~ *	_ }
TREET ADDRESS	240 LARKIN WILLIAMS IND CT		1.3 STREET ADDRESS			j
· · · · · · · · · · · · · · · · · · ·	FENTON MO 63026		1.4 City-ST-ZIP]
me.		DELETE	2.1 TITLE		Change	Addition
IAME	PETTY, GEORGE		2.2 NAME			_ (
TREET ADDRESS	272 SUTTER ST 5TH FL		2.3 STREET ADDRESS	921 98th AVE.		-
TY-ST-ZIP	SAN FRANCISCO CA 94108		2.4 City-ST-ZiP	DOLLAND CA 94603		
TILE		DELETE	3.1 TITLE	DAKLAND, CA 94603 PRESIDENT / DIRECTOR	☐ Change	Addition
AME	FERRIF. ADAM		3.2 NAME	FORTH SCHOOLING		
TREET ADORESS	222 SUTTER STREET, 9TH FLOOR		3.3 STREET ADDRESS	FRANK Schoonyoung 240 LARKIN WILLIAMS IN	d. Ct.	1
TY-ST-ZIP	SAN FRANCISCO CA		3.4. CITY-ST-ZIP	FENTON, MO 63026-2413		, }
ITLE		DELETE	4.1 TITLE	Director.	Change	Addition
AME			4, 2 NAME	DAVE BILLINGS		
TREET ADDRESS			4.3 STREET ADDRESS	DAVE BILLINGS 14722 ANSON AVE.		ł
ITY-ST-ZIP		i	4.4 CITY-ST-ZIP	SANTA FE SPRINGS CA 906	70	ĺ
ITLE	, , , , , , , , , , , , , , , , , , , 	DELETE	5.1 TITLE	<u> </u>	Change	Addition
IAME			5.2 NAME			\$
TREET ADDRESS			5.3 STREET ADDRESS			1
JTY-ST-ZIP			5.4 CITY-ST-ZIP			
me (DELETE	6.1 TITLE		Change	Addition
ا چنځ AME	14 3 5 5 1438	į	6.2 NAME			t
TREET ADDRESS			6.3 STREET ADDRESS			ļ
iTY-ST-ZIP	1		6.4 CITY-ST-ZIP			

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 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 charges, or on an application with an address, with all other like empowered.

SIGNATURE:

TREASURER

CR2E034 (11/98)

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