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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000032678**1. Corporation Name

BAYSIDE FOODS, INC.

		·								
Principal Place	e of Business	Mailing Address				1 19211001 119 15(1) 515(1) 55(1) 50(1) 50(1)				
8020 SW 138TH MIAMI FL 33183 US		P O BOX 960670 Miami Fl 33296-0670 US			DO NOT WRITE IN TH	IS SPAC	Œ			
00		•••				3. Date Incorporated or Qualifed 04/28/1994	. 1			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Apr	olied For	
21		26				65-0586601	[Applicable	1
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	F	Fee Re	·	
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees					
Zip 24	Country 25	Zip 29 30	Coun	itry		This corporation owes the current year I Personal Property Tax.	Ye	es	□No	
	9. Name and Address of Cur	rent Registered Agent	\perp			10. Name and Address of New Registere	d Agent	<u> </u>		+
CAN	CUEZ IODOE M		1	81	Name					}
SANCHEZ, JORGE M 8020 S.W. 138 COURT					Street Addr	ess (P.O. Box Number is Not Acceptable)				
MIAN	Al FL 33183		1	83						
					City					
office or re agent. I as	egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida, Such change was auth- igations of, Section 607.0505, Florida	orized Statut	by ir tes. _	e corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointmen	t as reg	gistered 	
	Signature, typed or printed name of registered	AND DIRECTORS (NOTE: Re	13.	agent s	agnature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIF	RECTO	RS IN 12	1
TITLE	PSD	DELETE	1,1 TITL	LΕ	<u> </u>	ADDITIONO/OF ATTOCKED TO GIVE TO CALLED		hange	Addition	1
NAME	SANCHEZ, JORGE M		1.2 NAM							١
STREET ADDRESS	8020 S.W. 138 CT		1.3 STR	REETA	DDRESS					
CITY-ST-ZIP	MIAMI FL 33183		1.4 CITY	Y-ST-	ZIP]
TITLE		☐ DELETE	2.1 TITL	E			□ c	hange	☐ Addition	ŀ
NAME			2.2 NAM	ME		•				
STREET ADDRESS			2.3 STR	REET A	DORESS					
CITY-ST-ZIP			2. 4 CIT		ZIP			<u> </u>	T 632000	4
TITLE		☐ DELETE	3.1 TITL	LE				hange	Addition	
NAME			3.2 NAN		ļ					1
STREET ADDRESS					DDRESS					}
CITY-ST-ZIP		☐ DELETE	3.4. CIT 4.1 TITL		ZiP		C	hange	Addition	1
TITLE		- Detter	4.1 HIL						— ··	
NAME					DDRESS					┢
STREET ADDRESS			4.3 STR		ļ					ļ
CITY-ST-ZIP		☐ DELETE	5.1 TITL		211			hange	Addition	1
NAME		_	5.2 NAM							
STREET ADDRESS			5.3 STR	REETA	DDRESS					
CITY-ST-ZIP			5.4 CIT	Y-ST-	ZIP					
TITLE		☐ DELETE	6.1 THL	LE				Change	☐ Addition	
NAMÉ		; 14	6.2 NAM	ME						
STREET ADDRESS		*	6.3 STR	REETA	DDRESS					ſ

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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNA	TURE	
-------	------	--

STREET ADDRESS

CITY-ST-ZIP

LUIRED

FILED

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90112 011 ***150.00

A ARROMAN AND REAL DERIG OUTST OCEN ERAND BOARD THIR ARRES DIGHT LODGE ROLL IN THE