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95 MAY -1 PH 1:43

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northon
Secretary of State
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V54380** (3)
F.S. DAIRY PLANT, INC.

Principal Place of Business: 5800 N.W. 74TH AVE. MIAMI FL 33166
Mailing Address: 5800 NW 74TH AVE MIAMI FL 33166 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
07/31/1992	04/29/1994
4. FEI Number	Applied For Not Applicable
65-0347718	
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contributions	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for changes in under 5: 100 USC Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State Apt. # etc.	26. State Apt. # etc.
22. City & State	27. City & State
24. Zip	30. Zip

9. Name and Address of Current Registered Agent

BARED, JOSE
5800 N.W. 74TH AVE.
MIAMI FL 33166

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0612 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 607.0612, Florida Statutes.

SIGNATURE: _____ (Print Name of Registered Agent) _____ (Print Name of Registered Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (12)	
1. TITLE	DP	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	BARED, JOSE	2. NAME	
3. STREET ADDRESS	5800 N.W. 74TH AVENUE	3. STREET ADDRESS	
4. CITY & STATE	MIAMI FL 33166	4. CITY & STATE	
5. TITLE	VP	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	MARC S. FELLER,	6. NAME	
7. STREET ADDRESS	5800 N.W. 74TH AVENUE	7. STREET ADDRESS	
8. CITY & STATE	MIAMI FL 33166	8. CITY & STATE	
9. TITLE	VP	9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	JOHN P. LAFRANKIE,	10. NAME	
11. STREET ADDRESS	5800 N.W. 74TH AVENUE	11. STREET ADDRESS	
12. CITY & STATE	MIAMI FL 33166	12. CITY & STATE	
13. TITLE		13. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
14. NAME		14. NAME	VP
15. STREET ADDRESS		15. STREET ADDRESS	Marci L. Yunko
16. CITY & STATE		16. CITY & STATE	5800 NW 74th Avenue
17. TITLE		17. TITLE	Miami FL 33166
18. NAME		18. NAME	
19. STREET ADDRESS		19. STREET ADDRESS	
20. CITY & STATE		20. CITY & STATE	
21. TITLE		21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME		22. NAME	
23. STREET ADDRESS		23. STREET ADDRESS	
24. CITY & STATE		24. CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in the laws of the State of Florida Statutes. Further, I certify that the information included in 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. The filing of this report or change of the registered office or registered agent of the corporation or the issuance of a franchise registration by this corporation is required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 13, of this report or change of office report with an address.

SIGNATURE: *Marci L. Yunko* 4/27/95 305-592-3100
 SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR
 Vice President