

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

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

-95 APR 27 PH 4:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 335271 (3)

1. Corporation Name

F. C. V. MEAT SALES, INC.

Principal Place of Business

1036 S.W. 1 ST.
MIAMI FL 33130

Mailing Address

1036 S.W. 1 ST.
MIAMI FL 33130

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
09/19/1968

3a. Date of Last Report
05/01/1994

4. FEI Number
59-1223778

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 1036 S.W. 1 ST.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

MIAMI FLORIDA

28 City & State

24 Zip 33130

25 Country US

29 Zip

30 Country

9. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICE/CANERA &
ASSOCIATES INC.
1036 S.W. 1 ST.
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name
FLORIDA ANNUAL REPORT SERVICES INC.
82 Street Address (P.O. Box Number is Not Acceptable)
1036 S.W. 1 ST.
83
84 City
MIAMI
85 Zip Code
FL 33130

11. 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.

SIGNATURE

[Signature]

AMADA C. LOPEZ-PRES

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CABELLO, ENRIQUE
STREET ADDRESS	11010 W. FLAGLER ST.
CITY - ST - ZIP	MIAMI FL
TITLE	D
NAME	CABELLO, JORGE
STREET ADDRESS	11010 W. FLAGLER ST.
CITY - ST - ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	000001471750
24 CITY - ST - ZIP	-05/02/95--01149--008
31 TITLE	****200.00 ****200.00
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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 119.07(3)(A), 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]

ENRIQUE CABELLO

4/95