


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 239562</b> 1. Entity Name <b>FRISCO FOOD SALES INC</b>	
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Principal Place of Business <b>1741 W. BEAVER ST. JACKSONVILLE, FL 32209 US</b>	Mailing Address <b>P.O. BOX 41430 JACKSONVILLE, FL 32203 US</b>
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04212007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-0917209</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>BEAVER STREET FOODS, INC. 1741 WEST BEAVER STREET JACKSONVILLE, FL 32209</b>
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**DO NOT WRITE  
IN THIS SPACE**

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. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVAS FRISCH, HANS 1741 W. BEAVER STREET JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST FRISCH, BENJAMIN 1741 W. BEAVER STREET JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FRISCH, E. KARL 1741 W. BEAVER STREET JACKSONVILLE, FL
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**DO NOT WRITE  
IN THIS SPACE**

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05/14/07-80032-013 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Hans Frisch*  
**HANS FRISCH**

*4/25/07*  
**4/25/07**

*(904)  
354-6533*  
**(904)  
354-6533**