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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

FILED	
Apr 22 1998 8:00am	1
Secretary of State	

	FHIDDLE MEAT & PRODUCE, II	NC.					
Principal Place of Business Mailing Address						- I DEBLUT BLAIN THEFE THOSE STATES BASES TOUR BLAIN	
350 CITRUS CLUD DR MERRITT ISLAND FL 33953 US		350 CITRUS CLUB DR MERRITT ISLAND FL 32853 US			DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified 03/30/1973	
_	Principal Place of Business	2a. Mailing Address				4. FEI Number	Applied For
21		26				59-1499773	Not Applicable
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23	City & State	City & State				6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fees	
24	Zip Country	Zip 29	30 Co	ritry		This corporation owes or has paid the current Personal Property Tax due June 30.	rrent year Intangible Yes No
9. Name and Address of Current Registered Agent				[10. Name and Address of New Registered	Agent
FRIODLE, THOMAS W. JR. 350 OTTRUS CLUB DR. MERRITT ISLAND FL 32953			81	Name			
				82			
				В3			
				84	City	Fl	85 Zip Code
11	 Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the St agent. I am familiar with, and accept the ob- 	ate of Florida. Such change	was authorize	d by	the corporation	oration submits this statement for the purpose on some source of directors. I hereby accept the ap	of changing its registered pointment as registered

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE FRIDDLE, THOMAS W.JR. NAME 1.2 NAME **350 CITRUS CLUB DRIVE** STREET ADDRESS 1.3 STREET ADDRESS MERRITT ISLAND FL 32953 CITY-ST-ZIP 1.4 CHTY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE FRIDDLE, RUTH R. NAME 2.2 NAME STREET ADORESS 1196 THREE MEADOWS DRIVE 2.3 STREET ADDRESS ROCKLEDGE FL 32955 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE FRIDDLE, JUNE M NAME 3.2 NAME \$50 CITURS CLUB DRIVE STREET ADDRESS 3.3 STREET ADDRESS **MERRITT ISLAND FL 32953** CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 THUE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 51 IIILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.9 STREET ADDRESS

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP