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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 480 298 1. Corporation Name PREMILLIM FOODS

PREMIUM Foods, Inc.

Principal Place of Business

Mailing Address

3225 Meridian Parkway FORT LANDERDALE FL 3333

TORT LAWNERSHIE	Lr 3.8331		3. Date Incorporated or Qualified	3a. Date of Last Report	
				8/13/96	
2. Principal Place of Business	28. Mailing Address		4. FEI Number	Applied For	
	26		59 - 1604786	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country	Zip	Zip Country 8. This corporation has liability for intangible tax under s. 199.03			
25	29 30		Florida Statutes	Yes No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
Comparation SERVICE Company 1201 Alays STREET Tallahassee FL 32301		81 Name			
		82 Street Add	2 Street Address (P.O. Box Number is Not Acceptable)		
		83			
) ()			
		84 City		85 Zip Code	
<u> </u>				FL S Zip Code	

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 ragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

*agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature typed or punted 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			
TITLE	V □ DELETE	1.1 TITLE	Change Addition			
NAME	CHRADENIAN Alex.	1.2 NAME				
STREET ADDRESS	co 3225 Maridian PKWY	1.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDANE FL 33331	1.4 CITY - S1 - 7IP				
TITLE	CO. X DELETE	2.1 TITLE	Change Addition			
NAME	corke, michael	2.2 NAME	& Gundling, David Clo Moo Lyster AVE			
STREET ADDRESS	clo woo ly ster vave	23 STREET ADDRESS	CLO MOD MOSTEL HAVE			
CITY-ST-ZIP	THOME ASUON NO 02005	2. 4 CITY - ST - ZIP	Spalle Brook M 67002			
TITLE	SCO DELETE	3.1 TOFLE	Change L Addition			
NAME ·	gunning, STEPHEN	3.2 NAME				
STREET ADDRESS	WOO LYSTER YAVE	3.3 STREET ADDRESS				
CITY-SI-ZIP	CANALE APPROON W/ 0)005	3 4. CITY - ST - ZIP				
TITLE	DELFTE	4 1 TITLE	L_ Change L_ Addition			
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREET ADDRESS				
CITY-ST-ZIP	T porte	4.4 CITY - ST - ZIP				
TITLE	DEFETE	5 1 TITLE	Change Addition			
NAME		5 2 NAMÉ	600002208856			
STREET ADDRESS		5.3 STREET ADDRESS	-06/11/9701075008			
CITY-ST-ZIP	T butter	5.4 CrTY - S1 - ZrP	***558.75			
TITLE	DEFEIE	6.1 THLE	Change Addition			
NAME		6.2 NAME	es			
STREET ADDRESS		63 STREET ADDRESS	* 6/4/§			
CITY OF BID		CARITY ST. 7D	, , , , , ,			

14. I do heroby 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 strug and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or tusted by powered 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 or an attachment with an address.

SIGNATURE:

5/28/97 (954)3841-800

FILED

Jun 04 1997 8:00am

Secretary of State