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

FILED
Jan 29 1998 8:00am
Secretary of State

DOCUMENT # 480292 (2)

1. Corporation Name

PREMIUM FOODS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3225 MERIDIAN PARKWAY FORT LAUDERDALE FL 33331	3225 MERIDIAN PARKWAY FORT LAUDERDALE FL 33331

3. Date Incorporated or Qualified
07/09/1975

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	**59-1604786**	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired ☑	**$8.75** Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
23	28		
Zip / Country	Zip / Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
24 / 25	29 / 30		

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City FL	85 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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
TITLE **P** / NAME **GARABEDDAN, ALEX** / STREET ADDRESS **3225 MERIDIAN PARKWAY** / CITY-ST-ZIP **FT. LAUDERDALE FL 33331**	☒ DELETE	1.1 TITLE **P** ☒ Change ☐ Addition 1.2 NAME Trimarche Richard 1.3 STREET ADDRESS 3225 Meridian Parkway 1.4 CITY-ST-ZIP Ft. Lauderdale FL 33331
TITLE **CD** / NAME **GUNDLING, DAVID** / STREET ADDRESS **C/O 400 LYSTER AVE** / CITY-ST-ZIP **SADDLE BROOK NJ 07662**	☐ DELETE	2.1 TITLE ☒ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 100 Galleria Parkway, Suite 1120 2.4 CITY-ST-ZIP Atlanta GA 30339
TITLE **SCD** / NAME **GUNNING, STEPHEN P** / STREET ADDRESS **400 LYSTER AVE** / CITY-ST-ZIP **SADDLE BROOK NJ 07662**	☒ DELETE	3.1 TITLE SCD ☒ Change ☐ Addition 3.2 NAME Aielli, Joseph S 3.3 STREET ADDRESS 100 Galleria Parkway, Suite 1120 3.4 CITY-ST-ZIP Atlanta GA 30339
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

CR2E034 (10/97)

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.

SIGNATURE _____ SIGNATURE REQUIRED _____   1/21/98   (954) 384-8005