## 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 # 490606

(1)

DON CARLOS FOODS, INC.

FILED Apr 29 1997 8:00am Secretary of State



Principal Place of Business 741 W. 17 ST, HALEAH FL 33010		Mailing Address 741 W. 17 ST. HIALEAH FL 33010-2416		. 1 JARIN AIGIG (BITT) BAING BAIN BAING BHA BIBIT BABIT GABIT BABIT BIBIT 1931	
				3. Date Incorporated or Qualified 12/15/1975	3a. Date of Last Report 05/01/1996
2. Principal Pia	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
<u> </u>		26		59-1638067	Not Applical
Suite, Apt.# 2	+, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	<u> </u>	6. Election Campaign Financing	\$5.00 May Be
		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032
	25	29	30	Florida Statutes	Yes No
	9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New Ro	agistered Agent
741 V	iik, Edward J. Nest 17th Street Eah Fl 33010		82 Street A 83 84 City	Address (P.O. Box Number is Not Accepta	FL 85 Zip Code
agent. Lan	ri familiar with, and accept the observation of registers	obligations of, Section 607.0505, and agent and tills ill applicable.	Florida Statutes.  NOTE Registered Agent agnature r		DATE
2. 		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TLE	PD CALADIC CAM	DELETE	1.1 TITLE		Change Addit
	SALNIK, SAM 741 W. 71 ST.		1.2 NAME		
	HIALEAH FL		1.3 STREET ADDRESS		
1Y-S1 ZIF	S S	DELETE	1.4 CITY-ST-ZIP		Change Addit
LE	SALNIK, SUSAN	[_] breen	2.1 TITLE 2.2 NAME		CT CHRUNG CT MODE
ME	741 W. 71 ST.				
REET ADDRESS	HIALEAH FL		2.3 STREET ADDRESS		
TY-ST-ZT TI	D	DELETE	2.4 CiTY-ST-ZIP		☐ Change ☐ Addi
ME	SALNIK, SUSAN	L., Decere	32 NAME		Emily Symples Emily Com
	741 W. 17 ST.		33 STREET ADDRESS		
TY - S1 - Z1P	HIALEAH FL		3.4. CITY-ST-ZIP		
ILF	VD	DELETE	4.1 TITLE	The second secon	Change Addit
NA.	SALNIK,EDWARD	band = 300 ft	4. 2 NAME		
BELLADOBESS	741 W. 17 ST.		4.3 STREET ADDRESS		
TY - ST - ZIP	HIALEAH FL		4.4 CITY-ST-ZIP		
ILE	VO	☐ DELETE	5.1 TillE		Change Addi
.ME	SALNIK, RICHARD		5.2 NAME		<u> </u>
	741 W. 17 ST.		5.3 STREET ADDRESS		
tr-S1-7IP	HIALEAH FL		5.4 CITY-ST-ZIP		
IT-S - ZIP	1 IN 18-14-7 W I 1 Th	DELETE	6.1 TITLE		Change Addi
			6.2 NAME		FT Stands FT vac.
AME not tables			<b>.</b>		
TREET ADORESS			6.3 STREET ADDRESS		
ILY ST-ZIF			6.4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	

I do he reby 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 an fial 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 exporation or the acceiver or viustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 11 changed, or opt in attachment with an address.

**SIGNATURE:** 

SIGNING OFFICER OR DIRECTOR

4-22-97 305-883-4858