## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with

SIGNATURE AND TYPED OR PRIN

SIGNATURE:

## ANNUAL REPORT (AR) Apr 29, 2005 8:00 am Secretary of State **DOCUMENT # 572477** 1. Entity Name 04-29-2005 90224 021 \*\*\*150.00 ROMA FOOD ENTERPRISES OF FLORIDA, INC. Principal Place of Business Mailing Address ONE ROMA BOULEVARD ONE ROMA BOULEVARD PISCATAWAY NJ 08854 PISCATAWAY NJ 08854 2. Principal Place of Business 3. Mailing Address 2650 E 1520 CHANCELLOR DR Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-1875848 ORLANDO Not Applicable RMTENNIA Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ 80112 ARARAHOE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent \_ - \_ C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CEO + DIRECTOR TITLE DPS Delete TITLE Addition PIANCONE, LOUIS GEORGE HOLM NAME NAME 12650 E ARAPA HOE RD STREET ADDRESS 7520 CHANCELLOR DRIVE STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP CENTENNIAL, CO 80112 PRESIDENT Delete TITLE Change X Addition TITLE MARK PEAK NAME STREET ADDRESS STREET, ADDIRESS. 7520-CHANCELLOR-DR-CITY-ST-ZIP CITY-ST-7IP ORLANDO, FL Delete TITLE SYP +CFO Change RUE Addition NAME NAME Tom MAGONAGLE 12650 E ARAPA HOE RD STREET ADDRESS STREET ADDRESS CENTENNIAL, CO 8011Z CITY-ST-ZIP CITY-ST-7IP Executive VP + Director ( Change TOTALE TITLE ☐ Defete Addition PATRICK MULHERN NAME NAME STREET ADDRESS 12650 E ARAPAHOE RA STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CENTENNIAL, CO 80112 SYP + SECRETARY KENT R. BERKE TITLE ☐ Change X Addition TITLE ☐ Delete NAME NAME 12650 E ARAPAHOE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 80112 CENTENNIAL, CO TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME Daniel KLEIN STREET ADDRESS STREET ADDRESS 7520 CHANCELLOR DR CITY-ST-ZIP ORLANDO. 32.809 FL 12. 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 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

Tom Mc Gonagle 4/4/04

FILED