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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **655936**

(3)

SUN PAC FOODS INTERNATIONAL, INC. Principal Place of Business Mailing Address U.S. HWY 17 AND SPIRIT LAKE RD. U.S. HWY 17 AND SPIRIT LAKE RD. P.O. BOX 9365 P.O. BOX 9365 WINTER HAVEN FL 33883-9365 WINTER HAVEN FL 33883-9365 3. Date Incorporated or Qualified 3a. Date of Last Report 02/08/1980 03/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2059582 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Ζφ Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FOLKARD, HUGH C. 117 WODEN WAY SE 82 Street Address (P.O. Box Number is Not Acceptable) WINTER HAVEN FL 33880 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Styrial we type diox pointed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE THE 1.1 TITLE Change Addition RIDDELL, JOHN A NAME 1.2 NAME R R 1 BOLTON STREET ADDRESS 1.3 STREET ADDRESS ONTARIO CA CHTY-\$1-7IP 1.4 CITY - ST-2IP DELETE MDF Change Addition TITLE 2.1 TATLE MCEWAN, VINCENT NAM² 2.2 NAME 37 FAIRLAWN AVENUE STREET ADDRESS 2.3 STREET ADDRESS ONTARIO, CANADA CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE ☐ Change TAS Addition TITLE 3.1 TITLE CRISS, C K NAMÉ 3.2 NAME 312 NIBLICK CIRCLE STREET ADDRESS 3.3 STREET ADDRESS WINTER HAVEN FL CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TIT, F 4 1 TITLE Change Addition FOLKARD, HUGH C. NAME 4. 2 NAME 117 WODEN WAY SE STREET ADDRESS 4.3 STREET ADDRESS WINTER HAVEN FL CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE KENNY, JAMES C. NAME 5.2 NAME 7 RAVENSBOURNE CT STREET ADDRESS 5.3 STREET ADDRESS ONTARIO CA CITY - \$1 - ZIP 5.4 CITY-ST-ZIP DELETE Change TITLE 6.1 TITLE Addition KNOWLES, CATHERINE NAME 62 NAME 226 CORNER RIDGE ROAD STHEET ADDRESS **6.3 STREET ADDRESS**

SIGNATURE:

CITY-ST-7iP

AURORA, ONTARIO, CANADA

appears in Block 12 or Block 13 if changed, or on an attachment with an address

LEGUTREDH.C. FOLKARD, VICE-PRESIDENT 4/29/97 941-5330808

64 CITY-ST-ZIP 14. I do 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