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Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90270 018 ***150.00

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 817449

1. Corporation Name
CHIKUITA BRANDS COMPANY, NORTH AMERICA

Principal Place of Business
C/O TAX DEPARTMENT
250 E FIFTH ST. 27TH FLOOR
CINCINNATI OH 45202

Mailing Address
C/O TAX DEPARTMENT
250 E FIFTH ST. 27TH FLOOR
CINCINNATI OH 45202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/29/1963

4. FEI Number

04-1348580

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

TITLE VSD
NAME ROBERT W. OLSON
STREET ADDRESS 250 E. FIFTH ST.
CITY-ST-ZIP CINCINNATI OH ☐ DELETE

TITLE V
NAME WARSHAW, STEVEN G.
STREET ADDRESS 250 EAST FIFTH ST
CITY-ST-ZIP CINCINNATI OH ☒ DELETE

TITLE VD
NAME TSACALIS, WILLIAM A.
STREET ADDRESS 250 E. FIFTH ST.
CITY-ST-ZIP CINCINNATI OH ☐ DELETE

TITLE VT
NAME KONDRITZER, GERALD R.
STREET ADDRESS 250 E. FIFTH ST.
CITY-ST-ZIP CINCINNATI OH ☐ DELETE

TITLE PD
NAME STALENHOEF, JOS
STREET ADDRESS 250 E FIFTH STREET
CITY-ST-ZIP CINCINNATI OH ☒ DELETE

TITLE V
NAME WARREN J. LIGAN
STREET ADDRESS 250 E FIFTH STREET
CITY-ST-ZIP CINCINNATI OH ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE V
2.2 NAME JUDITH A. Lemke
2.3 STREET ADDRESS 250 EAST FIFTH STREET
2.4 CITY-ST-ZIP CINCINNATI OH 45202 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE VD
5.2 NAME ROBERT F. KISTINGER
5.3 STREET ADDRESS 250 EAST FIFTH STREET
5.4 CITY-ST-ZIP CINCINNATI OH 45202 ☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

Judith A. Lemke
Signature and Typed or Printed Name of Signing Officer or Director

Date

Telephone #

CR2E034 (11/98)