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

Apr 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (1)R & E FOODS, INC. Principal Place of Business Mailing Address 1750 E. LAKE MARY BLVD. P. O. BOX 951358 P.O. BOX 951358 P.O. BOX 951358 DO NOT WRITE IN THIS SPACE SANFORD FL 32773 LAKE MARY FL 32795 3. Date Incorporated or Qualified 03/05/1981 2. Principal Place of Business 2a. Mailing Address Applied For 59-2065441 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 29 Personal Property Tax due June 30. 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SHEFFLER, RALPH 1750 E. LAKE MARY BOULEVARD Street Address (P.O. Box Number is Not Acceptable) SANFORD FL 32773 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 (NQ1£: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 11 TITLE SHEFFLER, RALPH NAME 1.2 NAME 1750 E. LAKE MARY BLVD. STREET ADDRESS 1.3 STREET ADDRESS SANFORD FL CITY-ST-ZIP 1.4 CITY-ST-ZIP STD DELETE Addition Change TITLE 21 TITLE SHEFFLER, EDNA NAME 2.2 NAME 1750 E. LAKE MARY BLVD. STREET ADDRESS 2 3 STREET ADDRESS SANFORD FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP TITLE VPD DELETE 3.1 TITLE Channe Addition SHEFFLER, SCOTT NAME 32 NAME 1750 E. LAKE MARY BLVD. STREET ADORESS 3.3 STREET ADDRESS SANFORD FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change \_\_\_ Addition 4.1 TITLE GOTTFRIED, MARCI 4. 2 NAME NAME 1750 E. LAKE MARY BLVD STREET ADDRESS 4.3 STREET ADDRESS SANFORD FL 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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.

5 4 CITY-ST-ZIP

6.4 CITY-S1-ZIP

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE: . (

CITY - ST - ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Edna M. Shoffler

DELETE

Change

Addition

**FILED** 

CR2E034 (10/97