

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 21 PM 2:34

DOCUMENT # F93000002667 (4)

1. Corporation Name

SUNSHINE FESTIVAL MARKETS, INC.

Principal Place of Business

3055 CARDINAL DRIVE
SUITE 304
VERO BEACH FL 32963
US

Mailing Address

3055 CARDINAL DRIVE
SUITE 304
VERO BEACH FL 32963
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/09/1993

3a. Date of Last Report

03/17/1994

4. FEI Number

65-0393253

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

IVAR W. MITCHELL

82 Street Address (P.O. Box Number is Not Acceptable)

3055 Cardinal Drive

83

Suite 304

84 City

Vero Beach

FL

85

Zip Code

32963

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

IVAR W. MITCHELL

3/16/95

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PCD
ANDUNGER, GERHARD R
3055 CARDINAL DRIVE
VERO BEACH FL 32963

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

V
MITCHELL, IVAR W
3055 CARDINAL DRIVE
VERO BEACH FL 32963

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S
MAGIDA, STEPHEN A
477 MADISON AVENUE
NEW YORK NY 10022

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

T
RUSSELL, JAMES R
303 SOUTH BROADWAY
TARRYTOWN NY 10591

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

N/A

☒ Change ☐ Addition

1.2 NAME

None

Deletion

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

D P S T

☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3055 Cardinal Drive Suite 304

3.1 TITLE

N/A

☒ Change ☐ Addition

3.2 NAME

None

Deletion

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

N/A

☐ Change ☐ Addition

4.2 NAME

None

Deletion

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

IVAR W. MITCHELL

IVAR W. MITCHELL

3/16/95

(407) 234-4998

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number