2000 UNIFORM BUSINESS REPORT (UBR)

May 01, 2000 8:00 am Secretary of State DOCUMENT # F9400000136 AMERISERVE FOOD DISTRIBUTION, INC. 05-01-2000 90472 027 ***150.00 Mailing Address Principal Place of Business 15305 DALLAS PKWY #1600 15305 DALLAS PKWY #1600 P.O. BOX 9016 P.O. BOX 9016 ADDISON TX 75001-9016 ADDISON TX 75001-9016 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 75-2296149 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 'ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITI F Change ☐ Addition CE0 ☐ Delete TITLE NAME NAME HOLTEN, JOHN V STREET ADDRESS STREET ADDRESS 545 STEAMBOAT ROAD CITY-ST-ZiP CITY-ST-ZIP **GREENWICH CT 06830** ☐ Change ☐ Addition ☐ Defete TITLE NAME ROGAN, KEVIN J STREET ADDRESS STREET ADDRESS 15305 DALLAS PKWY STE 1600 CITY-ST-ZIP CITY-ST-ZIP ADDISSON TX 75001-9016 ☐ Defete TITLE Change ☐ Addition TITLE NAME MARSHALL, RAYMOND NAME STREET ADDRESS STREET ADDRESS 15305 DALLAS PKWY STE 1600 CITY-ST-ZIP CITY-ST-ZIP ADDISSON TX 75001-9016 CEO ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME EVANS, JOHN R NAME STREET ADDRESS STREET ADDRESS 545 STEAMBOAT ROAD CITY-ST-ZIP CITY-ST-ZIP GREENWICH CT_06830 ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME SZLANDERBACH, S STREET ADDRESS STREET ADDRESS 15305 DALLAS PKWY STE 1600 CITY-ST-ZIP CITY-ST-7IP ADDISSON TX 75001-9016 ☐ Change □ Addition ☐ Delete TITLE TITLE NAME NAME MOOG, DIANA M STREET ADDRESS STREET ADDRESS 15305 DALLAS PKWY STE 1600 CITY-ST-ZIP CITY-ST-ZIP ADDISSON TX 75001-9016

FILED

SIGNATURE: USUA Carol A. Weiss, Assistant Secretary 4/26/2000 (972) 364-208

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Dayline Phone #

changed, or on an attachment with an address, with all other like empowered.

13. 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 11 or Block 12 if