## FILED Feb 01, 2005 8:00 am Secretary of State

2005 FU	IK PROFII GORPOKA I	IUN
	ANNUAL REPORT	

DOCUMENT # F9500002152  1. Entity Name AMERICAN FOODSERVICE DISTRIBUTORS COMPANY						02-01-2005	90053 (	001 ***60	00.00	
Principal Place of Business Mailing Address 600 CITADEL DRIVE PO BOX 512377 COMMERCE, CA 90040 US LOS ANGELES, CA 90051-			051-037	7 US		66000736				
2. Principal Place of Business 3. Mailing Address										
Suite, Apt. #, etc. Suite,		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01142005	Chg-P	CR2E0	34 (10/03)		
City & State City		City & State	City & State		4. FEI Numt 95-429	-		-	plied For t Applicable	
Zip		Country	Zip	Coun	try	5. Certificate	5. Certificate of Status Desired S8.75 Addition Fee Required			
	6. Name an	d Address of Curren	it Registered Agent			7. Name an	d Address of New R	egistered A	\gent	
CTOOP	ODATION	VOTEM.		-	Name	•	-			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			Street Addre	reet Address (P.O. Box Number is Not Acceptable)						
					City			FL	Zip Code	,
	named entity s		for the purpose of changing it	s register	l ed office or reg	istered agent, or b	oth, in the State of Flo		amiliar with,	and accept
SIGNATURE.	Signature broad as a	printed name of registered age	pt and lefts it applicable. ANO	TE: Booistoro	d Agent nignelius to	quired when reinstating)		DATE		
	Signature, typed or t	atines name of registered age	пталовия паряказня. (но	c. negistere	o võast alflustins te	quired when reinstating)	Υ	DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees										
10.		OFFICERS AN	D DIRECTORS	11.		ADDITIONS	L S/CHANGES TO OFFI	CERS AND	DIRECTORS	S IN 11
TITLE	CCEO		Delete	TITL			esident a C		☐ Change	Addition
NAME	ROEDER, R	oss	<b>—</b> 50,000	NAM	E F	tienne	Snoll aec	r <		, , , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	600 CITADEL DRIVE			STRE	ET ADDRESS (	600 Cita	der or.			
CITY-ST-ZIP	COMMERCI	E, CA 90040		CITY	-ST-ZIP	Commerc	ce CA 90	040		1
TITLE	SVPS		☐ Delete	TITLE	<u> </u>	Director	,		☐ Change	Addition
NAME	ALVARADO	, DONALD G		NAM	iE   i	Andre De	lolmo			
STREET ADDRESS	600 CITADE		-		ET ADDRESS	600 Midad	el Dr.	.1.5		
CITY-ST-ZIP	<del></del>	E, CA 90040		CITY	-\$1-ZIP	commer a	e. CA. 40	040		
TITLE	CFOT		☐ Delete	TITLI			PO, Senior	`V• <b>V</b> •	Change Change	☐ Addition
NAME expect approce	PHEGLEY, I			NAM	ET ADDRESS	Richard Pl	regiey.			
CITY-SI-ZIP	1	E. CA 90040				600 Citad		- 40		ĺ
TITLE	J J J J J J J J J J J J J J J J J J J	_, _,,	□ Delete	TITU		Commerce		090	☐ Change	4 Addition
NAME			Delete	NAM	1 - 2	Richald	froller		☐ Change	La Modition
STREET ADDRESS	]				ET ADDRESS	koo Clad	LINK.			
CITY-ST-ZIP				CITY	-ST-ZIP	Commerce	e CA 40	040		
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NAME				NAM	Ε   ´	Jan Beco	er		_ ,	_
STREET ADDRESS					ET ADDRESS	600 cital	lei VC.			
CITY-ST-ZIP				CITY	-ST-ZIP	Commerce	, CA 900	040		
TITLE			☐ Delete	TITU	I .				☐ Change	☐ Addition
NAME				NAM	1					
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS -ST-ZIP					[
		oformation	ish ship filling plans and account of			i- D41 110 0717	VO Fleside Communication	6		
12. 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 trudge empowered to execute disc report as reddired by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with an address, with all other like empowered.										
SIGNATURE: 128-05 323-869-7699										