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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
Apr 10 1996 8:00 am  
Secretary of State

DOCUMENT # F95000003834 (7)

1. Corporation Name

US FOODSERVICE OF FLORIDA, INC.



Principal Place of Business

1160 W. 13TH ST  
RIVIERA BEACH FL 33404

Mailing Address

1160 W. 13TH ST  
RIVIERA BEACH FL 33404

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 1065 Hwy 315

22 City & State

27 Suite 407

23 Zip

Country

28 Wilkes Barre PA

24

25

29 18702

30 US

9. Name and Address of Current Registered Agent

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

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 their applicator

(NOTE: Registered Agent Signature is filed when applicable)

(DATE)

12. OFFICERS AND DIRECTORS

1. TITLE

C  
BEVEVINO, FRANK H  
1065 HWY 315, CROSS CREEK POINTE  
WILKES-BARRE PA 19702

2. TITLE

VCV  
MCMULLEN, THOMAS G  
1065 HWY 315, CROSS CREEK POINTE  
WILKES-BARRE PA 19702

3. TITLE

D  
MCANALLY, DAVID F  
1065 HWY 315, CROSS CREEK POINTE  
WILKES-BARRE PA 19702

4. TITLE

PD  
SMITH, WILLIAM  
1160 W. 13TH ST  
RIVIERA BEACH FL 33404

5. TITLE

S  
CIANFLONE, ANN B  
1065 HWY 315, CROSS CREEK POINTE  
WILKES-BARRE PA 18702

6. TITLE

T  
SMITH, ROBERT  
1065 HWY 315, CROSS CREEK POINTE  
WILKES-BARRE PA 18702

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2. 2. TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3. 3. TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4. 4. TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5. 5. TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6. 6. TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert D. Smith  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 2, 1996

Daytime Phone #

CR2E034 (12/95)