Mar 12, 1999 8:00 am Secretary of State

03-12-1999 90017 033 ***450.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000004731

1. Corporation Name

FOOD CIANT OF PARTICAL INC.

roop G	IANT OF PADUCAH, INC.					
Principal Place	e of Business	Mailing Address				T 1001400 title (0134 Ditit natit satu estu estu entit sant sant imbes instructuration
120 INDUSTRIAL DR 120 INDUSTRIAL DR						
SIKESTON MO 63801 SIKESTON MO 63801						DO NOT WRITE IN THIS SPACE
					•	3. Date Incorporated or Qualifed
						09/28/1995
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21 26			_			61-0729139 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired \$8.75 Additional
27						Fee Required
City & State	City & State	State			6. Election Campaign Financing \$5.00 May Be	
23		28	Count	-		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Count	ıry		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No
24	9. Name and Address of Current		10			10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent	-	31	Name	10. (10.1)
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			1	82 Street Address (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324				83		
			1	84	City	FL 85 Zip Code
						poration submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State on m farniliar with, and accept the obligat	of Florida. Such change was autions of, Section 607.0505, Florid	nonzed i da Statut	by 1 es.	tne corporati	tion's poard of directors. Thereby accept the appointment as registered
	Signature, typed or printed name of registered agen			gent	t signature require	red when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AN	D DIRECTORS DELETE	13.			Change Addition
TITLE	STOREY, KENNETH E		1.2 NAV		}	_ `
NAME STREET ADDRESS	22 GREEN MEADOWS				ADDRESS	
	SIKESTON MO		1.4 C/TY			
CITY-ST-ZIP	ST	☐ DELETE	_	2.1 TITLE		☐ Change ☐ Addition
NAME	WATKINS, RONNIE J		2.2 NAM	ÆΕ		
STREET ADDRESS	1208 SALCEDO		2.3 STR	EET	ADDRESS	
CITY-ST-ZIP	SIKESTON MO		2. 4 C/TY+S		T-ZIP	
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME	· -·	•	3.2 NAN	Æ		
STREET ADDRESS			3.3 STR	EET	ADDRESS	
CITY-ST-ZIP			3.4. CIT	Y-\$	T- ZIP	
TITLE		☐ DELETE	4.1 TITLE		Ì	☐ Change ☐ Addition
NAME			4. 2 NA	MΕ		
STREET ADDRESS			4.3 STR	EET	ADDRESS	
CITY-ST-ZIP			4.4 CITY-S		r-zip	
TITLE		☐ DELETE	5.1 T/TL			☐ Change ☐ Addition
NAME			5.2 NAN			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			5.4 CIT		r-zip	☐ Change ☐ Addition
TITLE		☐ DELETE	6.1 TITL		}	☐ Change ☐ Addition
NAME	ì		6.2 NAN	ΝĖ	1	

CITY-ST-ZIP 14. 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 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 Biock 12 or Block 13 if cylinged, of on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS