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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700005692 (5)

RANDOLPH PACKING CO.

FILED Mar 05 1998 8:00am Secretary of State



						.	48 BI EUIJ 81 B J	#	
Principal Place of Business Mailing Address								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
275 ROMA JEAN PARKWAY 275 ROMA JEAN PARKWAY STREAMWOOD IL 80107-2964 STREAMWOOD IL 80107-29									
SINEAMITOL	70 KL 60107-2904	STREAMWOOD IL I	STREAMWOOD IL 80107-2964			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						10/29/1997			
·	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	A	pplied For	
21	. 5	26				36-2742176		ot Applicable	
Suite, Apt.	.#, GIC.	— — · · · ·	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional	
City & Stat	ta .		City & State			A Firefin Oran / Firefin		equired	
23		⊢ '	28			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has paid the		· · · · · · · · · · · · · · · · · · ·	
24	25	29	30			Personal Property Tax due June 30.	KX Yes	No	
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registere	d Agent		
	IRMIGNANI, A W			81 Na	ame				
1029 BARFIELD DRIVE				82 Sti	reet Addres	ss (P.O. Box Number is Not Acceptable)			
MA	ARCO ISLAND FL 33937					,			
				83					
				84 Cit	ty		85 Zip	Code	
44 Dureuppt	to the proulaions of Soctions 607.05	00 and 607 1609 Florida 1	Matudas the o			ration submits this statement for the purpose			
office or r	registered agent, or both, in the State	te of Florida. Such change	was authorized	by the	med corpor corporation	ration submits this statement for the purpose n's board of directors. I hereby accept the a	≀or changing ii .ppointment as	ts registered registered	
	im familiar with, and accept the obli	gations of, Section 607.050	15, Florida Stat	utes.					
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable	(NOTE Registered	i Agent sign	nature required	when reinstating) DATE			
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		RS IN 12	
TITLE	PCT	☐ DELET	1.1 Til	LE			☐ Change	Addition	
NAME	CARMIGNANI, A W		1.2 NA	ME					
STREET ADDRESS	1029 BARFIELD DRIVE		1.3 ST	REET ADDR	RESS				
CITY-ST-ZIP	MARCO ISLAND FL 33937			IY-ST-ZIP					
TITLE	DV CANDDA	☐ DELETI	E 2.1 TIT	LE			Change	☐ Addition	
NAME	BIGGUM, SANDRA 1609 PORTSMITH LANE		2.2 NA	-					
STREET ADDRESS	ARLINGTON HEIGHTS IL 60	004		REET ADDR		Ar.			
CITY-ST-ZIP TITLE	SVC	DELETI		TY-ST-ZIP	>		Change	- Addition	
NAME	PETERSON, R S		3.1 TIT 3.2 NA				∐ Change	☐ Addition	
STREET ADDRESS	120 PRATT BLVD.			mil Reet adori	F66				
CITY-ST-ZIP	ROSELLE IL 60172			TY-ST-ZIP	·				
TITLE		☐ DELETE					Change	Addition	
NAME			4. 2 N/	ME			-		
STREET ADDRESS			4.3 \$T	REET ADDRI	ESS				
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP					
TITLE	-	☐ DELETE	5.1 TIT	LE			Change	Addition	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET ADDRE	ESS			-	
CITY-ST-ZIP				Y-ST-ZIP					
TITLE		☐ DELETE					□ Change	Addition	
NAME			6.2 NA					•	
STREET ADDRESS	•		1	reet addre	ESS				
CITY-ST-ZIP	partify that the information cumplied	with this filing does not ave		Y-ST-ZIP	stated in Co	ection 119.07(3)(i), Florida Statutes. I further	nortification at at-	information	
indicated	on this annual report of/supplement	tal annual report is true and	i accurate and	that my	v signature :	shall have the same legal effect as if made i	under oath: tha	atlam an I	
Block 12 of	orrector of the corporation of the rec or Block 13 if changed, or on an app	ceiver or trustee empowere achment with an acdress.	o to execute th	ns repor	rt as require	ed by Chapter 607, Florida Statutes; and the	t my name app	pears in	