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PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # G44004



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 12, 1999 8:00 am Secretary of State 03-12-1999 90037 007 ***300.00

1. Corporation SUN-RIC	H FOODS, INC.				
Principal Place	e of Business	Mailing Address			T (MBYIS) ORS! BIBN ASAIL BRIST OFFI DIRN ASAIL ASAIL ASAIL ASAIL ASAIL ASAIL ASAIL ASAIL
1308 CLARE AVE C/O J.W. KILLEN WEST PALM BEACH FL 33401-6908 1308 CLARE AVENUE					
US WEST PALM BEACH FL 33401			CH FL 33401		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 07/01/1983
2. Principal Place of Business 2a. Mailing Address			ess	-	4. FEI Number . Applied For
		26			59-2292761 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #,	etc.		5. Certifcate of Status Desired
City & State			City & State		6. Election Campaign Financing \$5.00 May Be
3		28		-	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax.
	9. Name and Address	of Current Registered Agent			10. Name and Address of New Registered Agent
	FN 134/			81 Name	ne
KILLEN, J.W. 710 7TH LANE LK. WORTH FL 33463					eet Address (P.O. Box Number is Not Acceptable)
				83	
				84 City	FL 85 Zip Code
SIGNATURE		registered agent and title if applicable.	(NOTE: Registered	Agent signature	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ OE	LETE 1.1 TI	LE	· Change Addition
NAME	KILLEN, J.W.		1.2 N	ME	
STREET ADDRESS	710 7TH LANE		1.3 \$1	REET ADDRES	ess .
CITY-ST-ZIP	GREENACRES FL 334	163	1.4 C	TY-ST-ZIP	
TITLE		DE	LETE 2.1 TI	LE	VICE - PRES Change Addition
NAME			2.2 N/	WE	JAMES S. RICH
STREET ADDRESS			2.3 \$7	REET ADDRES	2638 HONEWOOD RD.
CITY-ST-ZIP			2.4 C	TY-ST-ZIP	W. PALH BCH., FL. 33406
TITLE		□ DE	ELETE 3.1 TI	LE	☐ Change ☐ Addition
NAME]		3.2 N	₩E	
STREET ADDRESS	<u>.</u>		3.3 \$1	REET ADDRES	:88
CITY-ST-ZIP				TY-ST-ZIP	
TITLE		∐ DE	LETE 4.1 TI		☐ Change ☐ Addition
NAME			4.2 N		·
STREET ADDRESS			1	REET ADDRES	ESS
CITY-ST-ZIP				TY-ST-ZIP	☐ Change ☐ Addition
TITLE			5.2 N		. — — Manide — Madinoli
NAME					
STREET ADDRESS			1	REET ADDRES	
CITY-ST-ZIP		Пъ		TY-ST-ZIP	Change Addition
TITLE		□ DE	6.2 N		
NAME	1				
STREET ADDRESS	ſ		E 63 C1	REET ADDRES	rss (

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-833-5647