FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

FILED
Mar 29 1996 8:00 am
Secretary of State

DOCUMENT # **G46473** **(6)**

1. Corporation Name

L. & L. SPECIALTY FOODS, INC.

Principal Place of Business

350 GOOLSBY BLVD.
5355 TOWN CENTER RD., SUITEE 801
DEEFIELD BEACH FL 33442
US

Mailing Address

350 GOOLSBY BLVD.
5355 TOWN CENTER RD., SUITEE 801
DEERFIELD BEACH FL 33442
US

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: **06/28/1983**

3a. Date of Last Report: **06/23/1995**

4. FEI Number: ~~59-1007925~~ 59-2301251 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ASARCH, STEVEN J
THE PLAZA/SUITE 801
5355 TOWN CENTER ROAD
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 _____ DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	KLINE, LARRY		1.2 NAME	
STREET ADDRESS	3766 N.W. 80TH STREET		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	FREEMAN, DONALD		2.2 NAME	
STREET ADDRESS	3766 NW 80TH STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FLORIDA 00000		2.4 CITY-ST-ZIP	
TITLE	PD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	KLINE, DAVID		3.2 NAME	
STREET ADDRESS	3766 NW 80TH STREET		3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FLORIDA 00000		3.4 CITY-ST-ZIP	
TITLE	SD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	KLINE, LOIS		4.2 NAME	
STREET ADDRESS	3766 NW 80TH ST.		4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	
TITLE	TD	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	CAINE, STEVEN		5.2 NAME	
STREET ADDRESS	3766 NW 80TH ST		5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	FREEMAN, DAVID		6.2 NAME	
STREET ADDRESS	3766 NW 80TH ST		6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		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)(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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: * Vice President 3/25/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

CR2E034 (12/95)