

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

FILED

**May 13 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # G60666 (6)
1. Corporation Name
MARYLAND CLUB FOODS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**C/O BROTHERS GOURMET COFFEES, INC.
2255 GLADES ROAD
BOCA RATON FL 33431**

3. Date Incorporated or Qualified
09/21/1983

4. FEI Number **59-2149033** 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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. 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

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PCEO	<input type="checkbox"/> DELETE
NAME	BREEN, DONALD	
STREET ADDRESS	2255 GLADES ROAD	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	VPFA	<input type="checkbox"/> DELETE
NAME	BILUNES, BARRY	
STREET ADDRESS	2255 GLADES ROAD	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	EVP	<input type="checkbox"/> DELETE
NAME	OLSON, TERRY	
STREET ADDRESS	2255 GLADES ROAD	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BOLDUC, JEAN PAU	
STREET ADDRESS	L13237 W MEATH LN	
CITY-ST-ZIP	CLARKSVILLE MD	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CASTLEMAN, PETER	
STREET ADDRESS	10 HUCKEBERRY HILL RD	
CITY-ST-ZIP	NEW CANNON CT	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	BILMES, BARRY
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Asst Secretary
4.3 STREET ADDRESS	ERIC DAVIS
4.4 CITY-ST-ZIP	2255 GLADES ROAD BOCA RATON FL 33431
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	S
6.3 STREET ADDRESS	JOHN RUPPELT
6.4 CITY-ST-ZIP	410 SEVENTEENTH ST., 22nd FLOOR DENVER CO 80202

14. I 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Barry Bilmes*

4/6/98

CR2E034 (10/97)