

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **G68309**

(5)

1. Corporation Name

GUBBIO FOOD CORPORATION

APPROVED
AND
FILED

SEP 11 11:10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Office of Corporation		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
5111-19 BAYMEADOWS RD. JACKSONVILLE FL 32217		5111-19 BAYMEADOWS RD. JACKSONVILLE FL 32217		11/08/1983	04/04/1994
21. State, Apt. #, etc.	26. State, Apt. #, etc.	4. F.C. Number	Applied For Not Applicable		
22. City & State	27. City & State	59-2339590			
23. City & State	28. City & State	5. Certificate of Status (Desired)	☐ \$8.75 Additional Fee Required		
24. City & State	29. City & State	6. Election Campaign Financing Total Fund Contribution	☐ \$5.00 May Be Added to Fees		
25. City & State	30. City & State	7. Have you paid your annual fee to the Florida Secretary of State?	☒ Yes ☐ No		

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ROTHSTEIN, SIMON D. 1530 ATLANTIC BANK BLDG. JACKSONVILLE FL 32202		81. Name	
		82. Street Address (P.O. Box Number is Not Accepted)	
		83. City & State	
		84. Zip	
		FL 85. Zip Code	

11. I hereby certify that the information furnished on this report is true and correct to the best of my knowledge and belief, and that I am a director, officer, or shareholder of the corporation. I understand that anyone who furnishes false or misleading information on this report or who omits material or information requested on the report may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).

12. I hereby certify that the information furnished on this report is true and correct to the best of my knowledge and belief, and that I am a director, officer, or shareholder of the corporation. I understand that anyone who furnishes false or misleading information on this report or who omits material or information requested on the report may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).

12. ADDITIONAL INFORMATION		13. ADDITIONAL CHANGES TO OFFICERS AND SHAREHOLDERS	
NAME	PTD SANTONI, BRUNO 5111-19 BAYMEADOWS RD. JACKSONVILLE FL	NAME	
STREET ADDRESS		STREET ADDRESS	
CITY & STATE	SD SANTONI, SILVANA 5111-19 BAYMEADOWS RD. JACKSONVILLE FL	CITY & STATE	
ZIP	AS ROTHSTEIN, SIMON D. 1530 ATLANTIC BANK BLDG. JACKSONVILLE FL	ZIP	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY & STATE		CITY & STATE	
ZIP		ZIP	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY & STATE		CITY & STATE	
ZIP		ZIP	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY & STATE		CITY & STATE	
ZIP		ZIP	

14. I hereby certify that the information supplied on this report is true and correct to the best of my knowledge and belief, and that I am a director, officer, or shareholder of the corporation. I understand that anyone who furnishes false or misleading information on this report or who omits material or information requested on the report may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR