2004 FOR PROFIT CORPORATION

FILED ANNUAL REPORT (AR) Mar 29, 2004 8:00 am DOCUMENT # H15970 **Secretary of State** 1. Entity Name 03-29-2004 90072 034 ***150.00 STEWART FOOD MARKETING, INC. Principal Place of Business Mailing Address 55 3RD ST NW 55 3RD STREET NW WINTER HAVEN FL 33881 PO BOX 7287 55 3RD STREET NW WINTER HAVEN FL 33883 2. Principal Place of Business Suite, Apt. #, etc CR2E034 (11/03) City & State Applied For 4. FEI Number 59-2436569 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STEWART, WILLIAM TERRY Street Address (P.O. Box Number is Not Acceptable) 55 3RD STREET NW WINTER HAVEN FL 33880 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida the obligations of registered agent. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS DP TITLE ☐ Addition TITI F ☐ Delete STEWART, WILLIAM TERRY NAME NAME STREET ADDRESS 55 THIRD STREET, NW STREET ADDRESS CITY-ST-ZIP WINTER HAVEN FL CITY-ST-ZIP Delete TITLE Addition TITLE STEWART, CHRISTOPHER H NAME NAME STREET ADDRESS 55 THIRD ST NW STREET ADDRESS CITY-ST-ZIP WINTER HAVEN FL CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. lent William Terry stewart 3-25-04 863-299-7177