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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

J12912

(8)

REAL SNACKS, INC.

Principal Place of Business	Mailing Address
CAN GERARDO E MERRERA	C/O GERARDO E HERR

2540 WEST & LANE

2540 WEST 6 LANE

## **FILED** May 07 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE HIALEAH FL 33010 HIALEAH FL 33010 3. Date Incorporated or Qualified 05/06/1986 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 26 Not Applicable 59-2675749 21 Suite, Apl #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Zip Country Z<sub>i</sub>D 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HERRERA, GERARDO F. 2540 WEST 6 LANE 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33010 83 84 City 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, typiod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE HERRERA, GERARDO F. NAME 1.2 NAME 2685 W 8 CT STREET ADDRESS 1.3 STREET ADORESS HIALEAH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 21 TITLE HERRERA, CRUZ M. 2.2 NAME NAME 2685 W 8 CT. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition Change 31 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP Addition DELETE Change 41 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-2IP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS

6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 arrival 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 changes are on an attachment with an address.

SIGNATURE:

us of . DERARDOF. HERRELD (PRES.)