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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # (8)

JAMES & JAMES GOURMET FOODS & WINES, INC.

Principal Place of Business Mailing Address

FILED Jan 16 1998 8:00am Secretary of State



US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/17/1987 2. Principal Place of Business 2a. Mailing Address 2f 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State City & State Zip Country Suite, Apt. #, etc. Country DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/17/1987 Applied For Not Applicable 5. Certificate of Status Desired Fee Required Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees Added to Fees Zip Country Zip Country 3. This corporation owes or has paid the current year Intangible	JACKSONVILLE FL 32211				JACKSONVILLE FL 32211						
A Principal Place of Business 2s. Mailing Address 4, FEI Number 1 Applied For 1/2 Net Applicable 1/2 Net								DO NOT WRITE IN THIS SPACE			
22								3. Date Incorporated or Qualified			
22								04/17/1987			
SUILA ADI, R. etc. Suita	2. Principal Place of Business				2a. Mailing Address				Applied For		
SUILA ADI, R. etc. Suita	21		<u> </u>				59-2794696	Not Applicable			
City & State City & State City & City & State City & State		#, etc.	,				¢Ω 7	 			
City & State City	22		27	27							
25)	City	City & State			6. Election Campaign Financing \$5.	00 May Be			
Zip Country Zip Country Berlinangible Personal Property Tax due June 20.	23			28	28						
28		Country Zip				Country		8. This corporation owes or has paid the current year	r Intangible		
S, Name and Address of Current Registered Agent JAMES, ELIZABETH A, 403 ATLANTIC BEACH ATLANTIC BEACH FL 32233 84 City 85 Street Address (P.O. Box Number is Not Acceptable) 86 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Zip Code 89 City 89 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607,1508. Florida Statutes, the above-ranced corporation submits this statement for the purpose of changing its registered agent, and another with, and accept the colligations of, Section 607,0505, Florida Statutes, submits this statement for the purpose of changing its registered agent, and are in a proposed agent and the application. (NOTE: Represent Agent agent agent and the proposed agent and the application. (NOTE: Represent Agent agen	24	25 29			30						
ATLANTIC BEACH FL 32233 Ba					Agent						
### ACTION CRACE ### ACTION CRACEE ### ACTION CRACE ### ACTION CRACEE ### ACTION CRACE ###						8	1 Name				
ATLANTIC BEACH FL 32233 84	1					-	(9) Chart Address (7) O. Bay Number is Net Assertable)				
B3 84 City FL 85 Zip Code	1					ľ	Street Address (P.O. Box Number is Not Acceptable)				
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 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, 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 with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12.	,,,,)			8	3				
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 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, 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 with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent with a directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12.						L					
11. Pursuant to the provisions of Sections 607 0502 and 507,1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of office or registered appoint, 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 it appointment as registered agent signature required when reintating) Date								F1_ i			
SIGNATURE Signature, typed or printed name of registered agent until title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	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										
SIGNATURE Signature, typed or printed name of registered agent until title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	office or re	egistered ager	nt, or both, in the	State of Florida, Su	ich change was	authorized	by the cor	poration's board of directors. I hereby accept the appointment	as registered		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.1 TITLE	agent. Lar	n familiar with	, and accept the	obligations of, Sec	tion 607.0505, Fi	iorida Statut	es.				
12.	SIGNATURE .			and a more and along the paragraph	noloto /NO	TC Popietorad 6	agat elapature	DATE			
TITLE		Signature, typed or					gent signature		TORS IN 12		
NAME JAMES, ELIZABETH A. TREET ADDRESS TREET ADDRESS TOP: ST: ZP JACKSONVILLE FL DELETE 2 1 TITLE NAME STREET ADDRESS CITY-ST: ZP Addition NAME STREET ADDRESS CITY-ST: ZP DELETE 3 1 TITLE Change Addition NAME STREET ADDRESS CITY-ST: ZP TITLE DELETE 3 1 TITLE Change Addition NAME STREET ADDRESS CITY-ST: ZP TITLE DELETE 4 1 TITLE Change Addition NAME STREET ADDRESS CITY-ST: ZP TITLE DELETE 4 1 TITLE Change Addition NAME STREET ADDRESS CITY-ST: ZP TITLE DELETE 4 1 TITLE Change Addition NAME STREET ADDRESS CITY-ST: ZP TITLE DELETE ADDRESS CITY-ST: ZP TITLE DELETE ADDRESS CITY-ST: ZP TITLE DELETE ADDRESS STREET ADDRESS CITY-ST: ZP TITLE DELETE ADDRESS STREET ADDRESS CITY-ST: ZP TITLE Change Addition Addition NAME STREET ADDRESS CITY-ST: ZP TITLE Change Addition Addition ADDRESS CITY-ST: ZP TITLE Change Addition Addition ADDRESS CITY-ST: ZP TITLE Change Addition Addition ADDRESS CITY-ST: ZP Change Addition Addition ADDRESS CITY-ST: ZP TITLE Change Addition Addition ADDRESS CITY-ST: ZP Addition ADDRESS CITY-ST: ZP		n	O/ I ICEIN	AND DIFFECTOR							
STREET ADDRESS		_	I IZARETH A								
14 CITY-ST-ZIP											
DELETE 21 TITLE	l I										
NAME		JACKSUN	VILLE FL		051575			Chee	an Addition		
2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	l I				LT DESCRIE			Giai	de 🗀 vocition		
CITY-ST-ZIP	NAME										
DELETE	STREET ADDRESS								ì		
NAME	CITY - ST - ZIP					_					
STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	TITLE				DELETE	3.1 TITLE		Li Unan	ge L Addition		
CITY-ST-ZIP	NAME					3.2 NAM	E				
DELETE	STREET ADDRESS					3.3 STRE	ET ADDRESS				
NAME	CiTY - ST - ZiP					3.4. CITY	-ST-ZiP				
STREET ADDRESS 4.3 STREET ADDRESS	TiTLE				DELETE	4.1 TITLE		Chan	ge L Addition		
STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	NAME					4. 2 NAM	E				
CITY-ST-ZIP						4.3 STRE	ET ADDRESS				
TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME						•					
NAME					DELETE			Chan	ge Addition		
STREET ADDRESS 53 STREET ADDRESS	=				_						
CITY-ST-ZIP	l l										
TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP						1					
NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP					DELETE			Chan	ge Addition		
STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - ZIP											
CITY-ST-ZIP 6.4 CITY-ST-ZIP											
CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.5 Caption 1.10 CTYON) Florida Cranulas 1 further captify that the information											
	CITY-ST-ZIP	- 415 - 115 - 111		and suddle stole fitte	/	6.4 CITY	-ST-ZIP	and in Continue \$10.07/9/6). Elevidor Chatatan 1 further conflict 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 tyle receiver or trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an atlachment with an address.