

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Carolee B. Merriam
Secretary of State
Tallahassee, Florida 32399-0001

**APPROVED
AND
FILED**

DOCUMENT # K74342

(2)

95 MAY -1 PM 2:43

Incorporated Under:

YASSOU FOOD CORP.

RECEIVED
TALLAHASSEE, FLORIDA

Principal Place of Business:

**3146 NORTHEAST 9TH ST.
FT. LAUDERDALE FL 33304**

Mailing Address:

**3146 NORTHEAST 9TH ST.
FT. LAUDERDALE FL 33304**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/21/1989		3a. Date of Last Report 04/28/1994	
21. State, Apt. #, etc.	22. City & State	26. State, Apt. #, etc.	27. City & State	4. FFI Number 65-0107033		Applied For Not Applicable	
24. Zip	25. Country	29. Zip	30. Country	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
KOKOYANNIS, ASPASIA 3146 N.E. 9TH ST. FT. LAUDERDALE FL 33304				B1. Name			
				B2. Street Address (P.O. Box Number is Not Acceptable)			
				B3.			
				B4. City			
				B5. 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 of Registered Agent (Typed Name)

Signature of Registered Agent (Typed Name)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	D	1.1 TITLE	☐ Change ☐ Addition
2. NAME	KOKOYANNIS, ASPASIA	1.2 NAME	
3. STREET ADDRESS	3146 N.E. 9TH ST.	1.3 STREET ADDRESS	
4. CITY, ST, ZIP	FT. LAUDERDALE FL	1.4 CITY, ST, ZIP	
5. TITLE		2.1 TITLE	☐ Change ☐ Addition
6. NAME		2.2 NAME	
7. STREET ADDRESS		2.3 STREET ADDRESS	
8. CITY, ST, ZIP		2.4 CITY, ST, ZIP	
9. TITLE		3.1 TITLE	☐ Change ☐ Addition
10. NAME		3.2 NAME	
11. STREET ADDRESS		3.3 STREET ADDRESS	
12. CITY, ST, ZIP		3.4 CITY, ST, ZIP	
13. TITLE		4.1 TITLE	☐ Change ☐ Addition
14. NAME		4.2 NAME	
15. STREET ADDRESS		4.3 STREET ADDRESS	
16. CITY, ST, ZIP		4.4 CITY, ST, ZIP	
17. TITLE		5.1 TITLE	☐ Change ☐ Addition
18. NAME		5.2 NAME	
19. STREET ADDRESS		5.3 STREET ADDRESS	
20. CITY, ST, ZIP		5.4 CITY, ST, ZIP	
21. TITLE		6.1 TITLE	☐ Change ☐ Addition
22. NAME		6.2 NAME	
23. STREET ADDRESS		6.3 STREET ADDRESS	
24. CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Law No. 1993-1, 1993, 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 liquidator thereof and I am providing this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 1.1, if changed or in an attached block.

SIGNATURE: *Aspasia Kokoyannis* **ASPASIS KOKOYANNIS**

4/29/95 **561-5015**