FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1995 JUN 20 AM 10:53

DOCUMENT # K84690

1. Corporation Name
FONTINA FOODS, INC.

800001519048
-06/21/95--01039--004
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
450 S.W. 12 Avenue 2665 South Bayshore Drive, Penthouse One-A Pompano Beach, FL 33060 US	c/o RICHARD A. FREEMAN 2665 South Bayshore Drive Penthouse One-A Coconut Grove, FL 33131

3. Date Incorporated or Qualified: 04/27/1989
3a. Date of Last Report: 05/01/94

2. Principal Place of Business	2a. Mailing Address
21 485 N.W. Enterprise Dr.	26 485 N.W. Enterprise Dr.
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23 Port St. Lucie, FL	City & State 28 Port St. Lucie, FL
Zip / Country 24 34986 / 25 US	Zip / Country 29 34986 / 30 US

4. FEI Number: 65-0124847 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

RICHARD A. FREEMAN
2662 South Bayshore Drive
Penthouse One-A
Coconut Grove, FL 33131

10. Name and Address of New Registered Agent

81 Name: Corporation Company of Miami
82 Street Address (P.O. Box Number is Not Acceptable): 100 Chopin Plaza
83: 1500 Edward Ball Building, Suite 1600
84 City: Miami FL 85 Zip Code: 33131

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: John D. Butler, Vice President DATE: 6/9/95
(Attach Registered Agent signature as first item if changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	BUSCAINO, MICHAEL	12 NAME	
STREET ADDRESS	450 SW 12 AVENUE	13 STREET ADDRESS	485 N.W. Enterprise Dr.
CITY ST ZIP	POMPANO BEACH, FL	14 CITY ST ZIP	Port St. Lucie, FL 34986
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY ST ZIP		24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	SCC 6-20-95

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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 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 changed, or on an attachment with an address.

SIGNATURE: J. Michael Buscaino 06-06-95 407 878 1400
SIGNATURE OF NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #