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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 22 1997 8:00am

Secretary of State

4-11-97 941-122-6127

(96/6)

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # <b>K93641**

(4)

SBS FOODS INCORPORATED

I am an officer or director of the co appears in Block 12 or Block 13 if

SIGNATURE:

Principal Place of Business Mailing Address **621 TREASURE BOAT WAY** 621 TREASURE BOAT WAY SARASOTA FL 34242 SARASOTA FL 34242-1411 3. Date Incorporated or Qualified 3a. Date of Last Report 06/07/1989 05/01/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0127712 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CHRISTIAN, RICHARD J. 81 Name **480 NORTH VENICE BYPASS** Street Address (P.O. Box Number is Not Acceptable) VENICE FL 34292 83 84 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. Lam familiar with land accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed harve of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE BILLE 1.1 TITLE Change Addition CHRISTIAN, RICHARD J. NAME 1.2 NAME **621 TREASURE BOAT WAY** STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL C(1 Y - S1 - Z)P 1.4 CITY - ST - ZIP DELETE TIME 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHY+\$1 ZIP 2. 4 CITY-ST-ZIP DELETE THE 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - \$1 - 71P 3.4. CITY-ST-ZIP DELETE TITLE Addition 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-ST-789 4.4 CITY-ST-7IP DELETE THLE 51 TITLE ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 City-St-7iP 11111 DELETE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** City - ST - 7IP 6.4 CHTY-ST-ZIP

14. I do 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 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 copyrigation of the receiver or trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name