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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:

P. O. BOX 7795



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 12 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L03431

(8)

Mailing Address P. O. BOX 7795

TEXAS-COAHUILA FOOD COMPANY, INC.

HOLLYWOOD	FL 33081	HOLLYW US	HOLLYWOOD FL 33081										
US			US	US					3. Date Incorporated or Qualified 07/19/1989	lified 3a, Date of Last Report 07/08/1996			
2. Principal P	Place of Busin	2a. Maili	2a. Mailing Address					4. FEI Number	1 70	JUJ 100		lied For	
21	idea or boar	26						65-0136953 Not Applic					
Suite, Apt.	#, etc	Suite	Suite, Apt. #, etc.					5. Certificate of Status Desired	×			Iditional	
City & Stat	te		City & State					6. Election Campaign Financing		\$5.	00 k	lay Be	
23		28	28								ded to		
Zip		Country	Zip				ountry		8. This corporation has liability for	intangible	tax und	ler s. 1	199.032,
24	25		29	29 30				L	Florida Statutes Yes X No				
	g, Name	and Address of Curre	ent Registered	Agent				-	io. Name and Address of New R	egistered	Agent		
ANO	GELLA, DIA	NE				81	Name)					
1946 TYLER ST						82 Street Address (P.O. Bo)			(P.O. Box Number is Not Accepta	ble)			
HOLLYWOOD FL 33020							and other regulation is transfer to the characters of						
,,,,,						83							
						84	City	······································		FL	85	Zip Co	ode .
11. Pursuant	to the provis	ions of Sections 607.05	02 and 607.15	08, Florida Statut	es, the a	LLLI above ed by	e-named the corr	d corpora	ation submits this statement for the 's board of directors. I hereby acce	purpose of	f changi pointmer	ing its	registered
agent. Fa	am familiar w	ith, and accept the obli	gations of, Sec	tion 607.0505, FI	orida Sta	atutes	S.	(porano)	, , , , , , , , , , , , , , , , , , , ,	,	•		
SIGNATURE		_											
<u></u>	Signature, typeo	or printed name of registered a				<u>-</u>	nl signature	re required v	when reinstating)	DATE			13.1 40
12.	1 2 7	OFFICERS A	ND DIRECTOR		13			· · · · · · · · ·	ADDITIONS/CHANGES TO OFFI	CERS AND	□ Cha		Addition
TITLE	P	LI BIBAIT		L DELETE		TITLE					(A16	1100	ווטוווטוא נייין
NAME		H, BIRGIT			1	NAME		İ					
STREET ADDRESS		YLOR ST.			1.3	STREET	ADDRESS						
CITY-ST-ZIP	HOLLYW	OOD FL			_	CITY-S	T-ZIP	-			TT &:		1 1 4 4 4 5 5 5 5
TITLE	\$			☐ DELETE		TITLE					Cha	nge	Addition
NAME	1 '	H, CLINT			2.2	NAME							
STREET ADDRESS		YLOR ST.			2.3	STREET	ADORESS	·	· .				
CITY - ST - ZIP	HOLLYM	1000 FL りに	utr		2.4	CITY-	ST-ZIP				-	· · · · · ·	
TITLE		AXEL E. STRAL	ICH M.D.	DELETE	3.1	TITLE					L Cha	inge	Addition
NAME					3.2	NAME							
STREET ADDRESS	l .	4721 TAYLOR			3.3	STREET	ADDRESS	;					
CITY-ST-ZIP	<u> </u>	<u>OLLYWOOD, FLO</u>	RIDA 3302	1	3.4.	CITY-	ST-ZIP						
TOLE				DELETE	4.1	TITLE					Cha	រហ ក្ខខ	☐ Addition
NAME					4. 2	NAME							
STREET ADDRESS					4.3	STREET	AODRESS	:					
CITY-ST-ZIP					4.4	CITY-S	ST-ZIP						
TITLE				☐ DELETE	5.1	TITLE					L Cha	inge	Addition
NAME					5.2	NAME							
STREET ADDRESS	1				5.3	STREET	ADDRESS	;					
CITY-ST-ZIP	<u> </u>				5.4	CITY-5	ST-ZIP						
TITLE				DELETE	6.1	TITLE					Cha	inge	Addition
NAME					6.2	NAME		1					
STREET ADDRESS					6.3	STREET	T ADDRESS	s					
CITY-ST-ZIP					6.4	CITY-S	ST-ZIP						
14. 1 do here	by certify th	at the information supp	lied with this fili	ng does not qual	ify for th	е ехе	mption s	stated in	Section 119.07(3)(i), Florida Statu	tes. I furthe	r certify	that the	he or colbi that
I am an e	officer or dire	on this annual report of ector of the corporation or Block 13 if changed	or the receiver	or trustee empor	wered to	exec RCCI	urate and cute this	s report a	y signature shall have the same leg is required by Chapter 607, Florida	Statutes;	s ii mad and that	my na	or Cairi; Irial ame
		/ X											