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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

Feb 05 1996 8:00 am

Secretary of State

DOCUMENT # L69587

1. Corporation Name

PORKY'S, INC.

Principal Place of Business

885 SE 14TH STREET
HIALEAH FL 33010

Mailing Address

885 SE 14TH STREET
HIALEAH FL 33010

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TERMINELLO, LOUIS J
2700 S.W. 37 AVENUE
MIAMI FL 33133-2728

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2700 SW 37 AVE

83

84 City Miami

FL

85 Zip Code 33133

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

STD
FAINBERG, LUDWIG
885 SE 14TH STREET
HIALEAH FL 33010

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

P
FAINBERG, LUDWIG
885 SE 14TH STREET
HIALEAH FL 33010

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

FAINBERG, LUDWIG
885 SE 14TH STREET
HIALEAH FL 33010

DELETE

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TITLE

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885 SE 14TH STREET
HIALEAH FL 33010

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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)(k), 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 as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ludwig Fainberg 1/16/96 305-887-1550

CR2E034 (12/95)