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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L91726

(4)

JUNO BEACH FOODS, INC.

FILED
May 15 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address										
13980 U.S. #1 P. O. 6		P. O. BOX 779	P. O. BOX 779 JUPITER FL 33468-0779							
		US				3. Date Incorporated or Qualifi 08/03/1990	ed 34	Date of Last	t Report	
2. Principa 21	f Place of Business	2a. Mailing Address				4. FEI Number 60-3413518			Applied For Not Applicable	
	pt #, etc	Suite, Apt. #, etc.	***************************************			5. Certificate of Status Desired			5 Additional Regulred	
City & S	State	City & State				Election Campaign Financin Trust Fund Contribution	, 		May Be	
Zip	Country	Zip	Cou	ntry		8. This corporation has liability			rs. 199.032,	
24	25	29	30			Florida Statutes	_	s No		
	9. Name and Address of Cur	rent Registered Agent		041	Name	10. Name and Address of Nev	Registe	red Agent		
	CHERER, ROBERT H			81	Name					
	571 BRISTOL WAY			82	Street Add	ress (P.O. Box Number is Not Acce	ptable)			
J	UPITER FL 33458			83		Mark 1919 - 11 - 12 - 177 - 17				
				84	City		1	FL 85 Zi	ip Code	
SIGNATUR	Signature, typed or printed name of registered					red when reinstating) ADDITIONS/CHANGES TO O		ATE AND DIRECTO	ORS IN 12	
TOLE	D	DELETE	1,1 70	LF		71001110110101111000110		☐ Chang		
NAME	SCHERER, ROBERT H	_	1.2 NA	ME				-		
STREET ADDRE	ss 8571 BRISTOL WAY		1.3 ST	REET	ADDRESS					
CITY-S1-ZIF	JUPITER FL 33458		1.4 Cf	1Y - S1	r - 21P					
1111.6		DELETE	21 TI	TLE				Chang	ge 🔲 Additi	
NAME			2 2 NA							
STREET ADDRE	SS				ADDRESS		1.1			
DITY-ST-ZP TITLE		DELETE	2.4 C		11 - ZIP			Chang	ie 🔲 Additi	
NAME		bear School	3.2 N/		ł					
STREET ADDRE	ss				ADDRESS					
CITY - S1 - ZIP			3.4 C		1					
TilleE		DELETE	4.1 70	TLE				Chang	e 🔲 Addit	
NAME			4.2 N	AME						
STREET ADDRE	SS		4.3 ST	REET	ADDRESS					
CITY-ST-ZIP		— —	4.4 CI		T-ZIP				. [1.42.00]	
TITLE		☐ DELETE	5.1 Ti					☐ Chang	ge 🔲 Additio	
NAME PROFES ADDRESS			5.2 N/		ADDOCCO					
STREET ADORE	22				ADDRESS 7-710					
CITY - ST - ZIP TITLE		☐ DELETE	5.4 CI 6.1 Tr		1-21			Chang	ge Additi	
NAM8			6.2 N/					American Control	, , , , , , , , , , , , , , , , , , , ,	
STREET ADDRE	58				ADDRESS					
CiTY-ST-ZIP			6.4 Cf		1					
						41 A - 1 - 440 07(0)() F1 - 4 - 0				

14. Loo 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 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:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/87

561-963-8043

Dayline Phone #