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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L98689

(7)

Mailing Address

SAMPLE FOOD AND BEVERAGE INC.

FILED
Mar 07 1997 8:00am
Secretary of State

		<u> </u>

760 W. SAMPLE POMPANO BEA	E ROAD ACH FL 33064-2780	760 W. SAMPLE POMPANO BEAC		4-2760					
						3. Date Incorporated or Qualified 08/13/1990		ite of Last R 22/1996	eport
	laco of Business	2a. Mailing Add	Iress			4. FEI Number		Ar	pplied For
21		26				65-0215519			ot Applicable
Suite, Apt 22	# <sub>i</sub> €tc.	Suite, Apt #	, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State 23	6	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
<b>Z</b> •p	Country	Zip		Cou	ntry	8. This corporation has liability for i	ntangible	tax under s	. 199.032,
24	25	29		30		Florida Statutes	Yes [	] No	
	g. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Re	gistered	Agent	
SAM	MIR HANTASH				81 Name		i i		
760	W SAMPLE RD				82 Street Add	Iress (P.O. Box Number is Not Acceptab	le)		
SUN	TE 255							<u></u>	
BOO	CA RATON FL 33431				83				
				·	84 City			<b>85</b> Zip	Code
					Oily		FL	, <b>  69</b>   219	oodo
office or r	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the o	tate of Florida. Such cha	nge was a	uthorize	I by the corpora	poration submits this statement for the p ation's board of directors. I hereby accep	orpose of the app	r changing i pointment as	registered registered
SIGNATURE	Son Park, Egyndiot per for non-elof rugistice	ed agent and fille / applicable	(NOTE	Registere	Agent signature requ	ired when reinstating)	DATE		
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND		
TIBLE	D		DELETE	1.1 TI	TLE			Change	Addition
NAME	HANTASH, SAMIR			1.2 N	ME				
STREET ADDRESS	760 W. SAMPLE RD			1.3 \$	REET ADDRESS				
CHY-ST ZIP	POMPANO BEACH FL			1.4 CI	TY-ST-ZIP				
TILE			DELETE	2.1 TI	rlE			☐ Change	Addition
NAME				2.2 N	AME				
STREET ADDRESS				2.3 \$	REET ADDRESS				
CHY-ST ZIP				2.46	ITY-ST-ZIP				
TITLE			DELETE	3.1 TI	TLE			Change	Addition
NAME				3.2 N	AME				
STREET ADDRESS				3.3 S	REET ADDRESS				
City-Si-ZiP				3 4. 0	ITY-ST-ZIP				
TIFLE			DELETE	4.1 T	TLE			Change	Addition Addition
NAME				4.21	AME				
STREET ADORESS				4.3 \$	REET AODRESS				
CITY ST ZIE				4.4 C	TY-ST-ZIP				
TITLE			DELETE	5.1 (	ILE			Change	Addition
NAME				5.2 N	AME				
STREET ADURESS				5.3 S	REET ADDRESS				
CITY- ST. ZIF					TY-ST-ZIP				
THE			DELETE	6.1 T	<del></del>			Change	Addition
NAMí				6.2 N	AME				
STREET AUDRESS					IREET ADDRESS				
CI*Y+SI+Zi≥					TY-ST-ZIP				
	hu corté that the interrestion e u	solied with this filing does	s not quali			ed in Section 119.07(3)(i), Florida Statute	s. Lifurthe	r 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; 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:

954-941-746