

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 02, 2004 08:00 AM
Secretary of State

DOCUMENT # M02000001581

1. Entity Name
MIAMI FOODCO INVESTORS, LLC



Principal Place of Business

C/O CARDINAL CAPITAL PARTNERS, INC.
8214 WESTCHESTER DRIVE, 9TH FLOOR
DALLAS, TX 75225

Mailing Address

C/O CARDINAL CAPITAL PARTNERS, INC.
8214 WESTCHESTER DRIVE, 9TH FLOOR
DALLAS, TX 75225



02202004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

48-1262837

Applied For

Not Applicable

5. Certificate of Status Desired. ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

U000000073817
03/02/04-80052-022 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	KIPP, SCOTT M
STREET ADDRESS	8214 WEESTCHESTER DR 9TH PL
CITY-ST-ZIP	DALLAS, TX 75225
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-20-04

Date

214 696 3600

Daytime Phone #