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Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M03039

(8)

1. Corporation Name
LIBERTY PACKING, INC.

Principal Place of Business
1133 53RD CT., N.
MANGONIA PARK FL 33407

Mailing Address
1133 53RD CT., N.
MANGONIA PARK FL 33407-2347



2. Principal Place of Business

21 State: ☐ Florida

22 City & State

23 Zip

24

2a. Mailing Address

26 State: ☐ Florida

27 City & State

28 Zip

29

3. Name and Address of Current Registered Agent

RUBIN, AMY S.
777 S FLAGLER STE 202
WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified
07/24/1984

3a. Date of Last Report
07/08/1996

4. FET Number
59-2044612

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.05(2) and 607.15(8), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered
office and principal place of business in 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 of the corporation and I hereby accept the change of office, Section 607.05(8), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

11 NAME ☐ DELETE

12 NAME
3593 BIRDIE DRIVE #305
LAKE WORTH FL

13 NAME ☐ DELETE

14 NAME
1133 53RD CT. NO.
MANGONIA PARK FL

15 NAME ☐ DELETE

16 NAME ☐ DELETE

17 NAME ☐ DELETE

18 NAME ☐ DELETE

19 NAME ☐ DELETE

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33 NAME ☐ DELETE

34 NAME ☐ DELETE

35 NAME ☐ DELETE

36 NAME ☐ DELETE

37 NAME ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 NAME ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

15 NAME ☐ Change ☐ Addition

16 NAME

17 STREET ADDRESS

18 CITY, ST, ZIP

19 NAME ☐ Change ☐ Addition

20 NAME

21 STREET ADDRESS

22 CITY, ST, ZIP

23 NAME ☐ Change ☐ Addition

24 NAME

25 STREET ADDRESS

26 CITY, ST, ZIP

27 NAME ☐ Change ☐ Addition

28 NAME

29 STREET ADDRESS

30 CITY, ST, ZIP

31 NAME ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

35 NAME ☐ Change ☐ Addition

36 NAME

37 STREET ADDRESS

38 CITY, ST, ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald S. Kohn

2/12/97

561-841-6644

0300284

CR2E034 (9/96)