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

FILED Feb 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # M80318 (2) UNIVERSAL MEATS, INC. Principal Place of Business Mailing Address 2700 N 29TH AVE 2700 N 29TH AVE 2018 201S HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 05/11/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0051202 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Suite #304 Suite #30 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent LHOTKA, JOSEPH W. W. LHOTKA 11900 BISCAYNE BLVD., #268 82 **MIAMI FL 33181** 83 City Zip Code 33 433 BOCA RATON 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 objigations of, Section 607.0505, Florida Statutes. tholla JOSEPH W. LHOTKA 1-25-98 SIGNATURE (NOTF: Registered Agent signature required when reinstating) od name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE Change LHOTKA, JOSEPH W. LHOTKA, JOSEPH W. NAME 1.2 NAME 23564 CARAVELLE CIRCLE BOCA RATION, FL. 33433 11900 BISCAYNE BLVD 268 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE JOSEPH W. LHOTKA LHOTKA, JOSEPH W. NAME 2.2 NAME CINCLE 22564 CARAVELLE 11900 BISCAYNE BLVD 268 STREET ADDRESS 2.3 STREET ADDRESS BOCA RATON, FL 33433 MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ☐ Addition NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP ☐ DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP 14. Thereby 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