## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## P00000044176 **DOCUMENT #**

1. Entity Name

JC SPECIALTY FOODS, INC.



**FILED** Mar 13, 2003 8:00 am Secretary of State 03-13-2003 90082 016 \*\*\*150.00

Principal Place 17855 U.S. HIGH MOUNT DORA I	IWAY 441. SUITE 6	Mailing Address 17855 U.S. HIGHWAY 441, SUITE 6 MOUNT DORA FL 32757								
2. Principal Pla	ce of Business	3. Mailing Address						LOLIS OBISE OSOI		
Suite, Apt. #	, etc.	Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES			
City & State		City & State				4. FI	59-3642623		<u> </u>	lied For Applicable
Zip	Country	Zip		Coun	try		ertificate of Status Desired		8.75 Additi	ional
	6. Name and Address of Current F	l Registered	I Agent			7. N	ame and Address of New Re	gistered Ag	ent	
	O. TABILLO GIAG ACCIDED TO				Name					
SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE					Street Address (P.O. Box Number is Not Acceptable)					
	RIA AVENUE BLES FL 33134		* 4	i i					Zip Code	
					City			FL	Zip Code	
	named entity submits this statement for				ad office or regi	etored and	ent or both in the State of Flor	ida. I am fa	miliar with, a	nd accept
8. The above the obligation	named entity submits this statement for ons of registered agent.	the purpo	ose of changing its	register	ed office of regi	sieres age	one, or bown, in this create in			
SIGNATURE _			, MOT	E. Bagistore	d Agent signature rec	nuired when re	instating)	DATE		
	Signature, typed or printed name of registered agent a	and title if appli	icable. (NOTI	c. negistere						
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00	. C4-4-				,	<ol> <li>Election Campaign Final Trust Fund Contribution</li> </ol>			May Be to Fees
Make Check	Payable to Florida Department of			11.		AD	DITIONS/CHANGES TO OFFI	CERS AND	DIRECTORS	IN 11
10.	OFFICERS AND	DIRECTO		TIT	<del></del>		BIT BIT OTTO TO THE TOTAL TOTAL TO THE TOTAL TOTAL TOTAL TOTAL TOTAL TO THE TOTAL TOTAL TOTAL TOTAL TOTAL TOT		☐ Change	☐ Addition
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NAME	PEREZ, RICARDO	- e			EET ADDRESS					
STREET ADDRESS	17855 U.S. HIGHWAY 441, SUITI MOUNT DORA FL 32757	E 0			Y-ST-ZIP					
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NAME STREET AODRESS	MICKENBERG, ADAM   17855 U.S. HIGHWAY 441, SUIT	FA		STE	REET ADDRESS					
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12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.