## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## ANNUAL REPORT DOCUMENT # P00000049103

1. Enlity Name
ULTRAFOODS INC.

FILED Apr 19, 2004 08:00 AM Secretary of State

Principal Place of Business

5827 17TH STREET E BRADENTON, FL 34203 Mailing Address

5827 17TH STREET E BRADENTON, FL 34203



02102004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1017764 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARDI, LES 7061 S. TAMIAMI TRAIL SARASOTA, FL 34231-5559

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SARASOI	A, F£ 34231-0009			N	THIS SPACE
	named entity submits this statement for the places of registered agent.	surpose of changing its registered	d office or	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or pricted name of registered agent and title	d applicable. (NOTE, Registered	Agent signstun	a required when relastating)	אמס
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			
TITLE HAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PD ADAM, CHARLES 5827 17TH ST E BRADENTON, FL 34203	TORS		#99900120397 94/19/04-80130-019 150.00 CL	
NAME STREET AODRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET AODRESS CHY-ST-ZIP					
NAME STREET ADDRESS GUY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

CITY-ST-ZIP

Charles Adams

24/16/2004 (941)751-2345

Daytime Phone