## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 14, 2004 08:00 AM Secretary of State **DOCUMENT # P01000063441** 1. Entity Name FOOD BROKERS OF FLORIDA, INC. Mailing Address Principal Place of Business 9591 SUN ISLE DR 8601 4TH STREET N 303 303 SAINT PETERSBURG, FL 33702 SAINT PETERSBURG, FL 33702 04082004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3747374 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE HANKS, MARK 8601 4TH ST NORTH, SUITE 303 ST PETERSBURG, FL 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, the obligations of registered agent. SIGNATURE\_\_\_\_\_\_Squature, typed or primed name of registered agent and tallo if applicable. (NOTE: Registered Agent signature required when reinstating) U00000112819 9. Election Campaign Financing \$5.00 May Be 04/14/04-80038-002 150.00 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, П Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE D HANKS, SUSA NAME STREET ADDRESS 8601 4TH ST N, SUITE 303 CITY-ST-ZIP ST PETERSBURG, FL 33702 HUE D NAME HANKS, MARK 8601 4TH ST N, SUITE 303 STREET ADDRESS CITY-SI-ZIP ST PETERSBURG, FL 33702 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE BITLE NAME STREET ADDRESS CITY-ST-ZIP

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. 578-4013

TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

MARK

**FILED**