


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90289 036 ***150.00

DOCUMENT # P25347					
1. Entity Name SYSCO FOOD SERVICES OF SOUTH FLORIDA, INC.					
Principal Place of Business 1390 ENCLAVE PARKWAY HOUSTON, TX 77077			Mailing Address 1390 ENCLAVE PARKWAY HOUSTON, TX 77077		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 74-2541433	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CAPITOL CORPORATE SERVICES, INC. 1333 NORTH DUVAL STREET TALLAHASSEE, FL 32303			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PCEO	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BROWN, TIM		NAME	PLEASE SEE ATTACHED LIST	
STREET ADDRESS	555 NE 185 ST		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33179		CITY-ST-ZIP		
TITLE	EVP	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HEADRICK, MICHAEL S		NAME		
STREET ADDRESS	555 N.E. 185TH ST.		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33179		CITY-ST-ZIP		
TITLE	SRVP	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GUIBARA, FRED L		NAME		
STREET ADDRESS	555 N.E. 185TH ST.		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33179		CITY-ST-ZIP		
TITLE	VPFS	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BLAINE, GARY A		NAME		
STREET ADDRESS	1390 ENCLAVE PARKWAY		STREET ADDRESS		
CITY-ST-ZIP	HOUSTON, TX 77077		CITY-ST-ZIP		
TITLE	CFO	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BLAINE, GARY A		NAME		
STREET ADDRESS	1390 ENCLAVE PARKWAY		STREET ADDRESS		
CITY-ST-ZIP	HOUSTON, TX 77077		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NICHOLS, MICHAEL C		NAME		
STREET ADDRESS	1390 ENCLAVE PARKWAY		STREET ADDRESS		
CITY-ST-ZIP	HOUSTON, TX 77077		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.					
SIGNATURE: <i>Connie S. Brooks</i>		Date: <i>04/26/04</i>		Daytime Phone #: <i>281 584-1390</i>	
Asst. Secretary					

Sysco Food Services of South Florida, Inc.

OFFICERS:	TITLE	NAME	MAILING ADDRESS
	President; CEO	Tim K. Brown	555 NE 185th Street, Miami, FL 33179
	Executive Vice President	Julie O. Swan	555 NE 185th Street, Miami, FL 33179
	Vice President-Finance, CFO	Thomas C. Cryster	555 NE 185th Street, Miami, FL 33179
	Vice President	Michael C. Nichols	1390 Enclave Parkway, Houston, TX 77077
	Vice President	Aaron I. Katz	1390 Enclave Parkway, Houston, TX 77077
	Vice President	Thomas P. Kurz	1390 Enclave Parkway, Houston, TX 77077
	Asst Vice President & Secretary	Ann F. Gullion	1390 Enclave Parkway, Houston, TX 77077
	Treasurer	Diane Day Sanders	1390 Enclave Parkway, Houston, Texas 77077
	Assistant Treasurer	Kathy Oates	1390 Enclave Parkway, Houston, TX 77077
	Assistant Secretary	Connie S. Brooks	1390 Enclave Parkway, Houston, TX 77077
	Assistant Secretary	Paula J. Blone	1390 Enclave Parkway, Houston, TX 77077
	Assistant Secretary	Linda S. DeLeon	1390 Enclave Parkway, Houston, TX 77077
DIRECTORS:	TITLE	NAME	MAILING ADDRESS
		Michael C. Nichols	1390 Enclave Parkway, Houston, TX 77077
		Stephen F. Smith	2225 Riverdale Road, College Park, GA 30349
		Tim K. Brown	555 NE 185th Street, Miami, FL 33179

Attachment

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