

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

000564

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 26, 1999 8:00 am**  
**Secretary of State**

04-26-1999 90214 034 \*\*\*150.00

DOCUMENT # P31575

1. Corporation Name

SLIM-FAST FOODS COMPANY

Principal Place of Business

777 S. FLAGLER DRIVE  
WEST TOWER, SUITE 1400  
WEST PALM BEACH FL 33401

Mailing Address

101 PARK AVENUE  
SUITE 3500/J. OSTRAGER  
NEW YORK NY 10178

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/30/1990

4. FEI Number

13-3585245

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE EVP ☐ DELETE  
NAME WAITMAN, BARBARA  
STREET ADDRESS 777 SOUTH FLAGLER DRIVE  
CITY-ST-ZIP WEST PALM BEACH FL

1.1 TITLE DIRECTOR ☐ Change ☐ Addition  
1.2 NAME DR. EDWARD L. STEINBERG  
1.3 STREET ADDRESS 777 SOUTH FLAGLER DRIVE  
1.4 CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE D ☐ DELETE  
NAME HERZOG, ISAAC  
STREET ADDRESS 777 SOUTH FLAGLER DRIVE  
CITY-ST-ZIP WEST PALM BEACH FL

2.1 TITLE DIRECTOR ☐ Change ☐ Addition  
2.2 NAME TAMAR ABRAHAM  
2.3 STREET ADDRESS 777 SOUTH FLAGLER DRIVE  
2.4 CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE C ☐ DELETE  
NAME WILLIAM GLORIT  
STREET ADDRESS 777 SOUTH FLAGLER DRIVE  
CITY-ST-ZIP WEST PALM BEACH FL

3.1 TITLE ASSISTANT TREASURER ☐ Change ☒ Addition  
3.2 NAME WILLIAM GLORIT  
3.3 STREET ADDRESS 777 SOUTH FLAGLER DRIVE  
3.4 CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE D ☐ DELETE  
NAME ABRAHAM, S. DANIEL  
STREET ADDRESS 777 SOUTH FLAGLER DRIVE  
CITY-ST-ZIP WEST PALM BEACH FL

4.1 TITLE DIRECTOR ☐ Change ☒ Addition  
4.2 NAME RONALD STERN  
4.3 STREET ADDRESS 777 SOUTH FLAGLER DRIVE  
4.4 CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE D ☐ DELETE  
NAME FLEMING, PETER  
STREET ADDRESS 101 PARK AVE #3500  
CITY-ST-ZIP NEW YORK NY

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE P ☐ DELETE  
NAME STERN, RONALD  
STREET ADDRESS 777 SOUTH FLAGLER DRIVE  
CITY-ST-ZIP WEST PALM BEACH FL

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information on supplied with this filing does not qualify for the exemption stated in Section 119.073(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, with a different like empowered.

SIGNATURE:

*William Glorit*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)