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

PROFIT **CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT

Sandra B. Mori

Secretary of Sta

DIVISION OF CORPORATIONS

FILED Jan 29 1998 8:00am Secretary of State

MEATR	A AMERICA, INC.	0013755 (3)			
Principal Plac	e of Business	Mailing Address		1 10041001 140 10110 11011 00111 00111 00111 00111	ian oliti tadat dirat dest tadt
1515 8 FEDE	RAL HWY	1515 S FEDERAL HWY			
STE 103 BOCA RATON FL 33432		STE 103		DO NOT WRITE IN THIS	SPACE
US	N FL 33432	BOCA RATON FL 33432 US		3. Date Incorporated or Qualified	1
		•		12/23/1992	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0376320	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		3. Certificate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	1	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	9. Name and Address of Curren	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
		it Hogietorou regoni	81 Name	10, Hamo and Address of How Hogistolog	Agom
	ERTZ, HERBERT				
1515 \$ FEDERAL HWY			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
STE 103 BOCA RATON FL 33432			83		
ВО	CA RATON FL 33432				
			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		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	GOERTZ, HERBERT P		1.2 NAME		
STREET ADDRESS	1515 S FEDERAL HWY		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432	CI DELETE	1.4 CITY-ST-ZIP		Observe Addition
TITLE		☐ DELETE	2.1 TITLE		Change
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
TITLE			3.2 NAME		Change C rodition
NAME PARECE ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS			3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		İ
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14 hereby o	ertify that the information supplied wi	th this fiting does not qualify for	or the exemption stated in	Section 119 07(3)(i) Florida Statutes Lifurther o	ertify that the information

receipt certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is frue 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. 1501-