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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000013851 (9)

FEDERAL HIGHWAY YOGURT INC

FILED May 01 1998 8:00am Secretary of State

i Loci	AL HIGHWAT TOGOTT, IN					
Principal Pla	ce of Business	Mailing Addr	ess			n tentinde isa sossa ((itt entit nost) entit dètal finan inim nim) tial fau indi
4840 NORTI	FEDERAL HIGHWAY	114 SW 10T	H ST			
FORT LAUDERDALE FL 33308 SUITE C						
FT. LAUDERDALE FL 33315			5		DO NOT WRITE IN THIS SPACE	
		U\$				3. Date Incorporated or Qualified 02/24/1993
2. Principal	Place of Business	2a. Mailing A	ddress			4. FEI Number Applied For
21		26				65-0390753 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional	
27					Fee Required	
City & State					6. Election Campaign Financing \$5.00 May Be	
23					Trust Fund Contribution	
Žip	Country	Zip Country		У	8. This corporation owes or has paid the current year Intangible	
24	25	29		10		Personal Property Tax due June 30. Yes No
 	9. Name and Address of Curre	int Registered Agei	<u> </u>		1	10. Name and Address of New Registered Agent
	ONGE, MARK W			81	Name	
649 SW 8TH TERRACE			82	Street A	ddress (P.O. Box Number is Not Acceptable)	
F	r. Lauderdale fl 33315			ļ	ļ	
				83		
				84	City	85 Zip Code
						FL ^
11. Pursuan	to the provisions of Sections 607.05	02 and 607,1508, FI	orida Statutes	s, the abov	e-named c	corporation submits this statement for the purpose of changing its registered
agent. I	am familiar with, and accept the oblig	gations of, Section 6	07.0505, Flori	da Statute	S.	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered ag		(NOTE: I		ent signature re	equired when re-instating) DATE
12.	OFFICERS AN	ND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	YONGE, MARK W	L —.i	OLLEIL	1.1 TITLE		Crange Li Addition
NAME	A40 DUI OTH TEDDAGE			1.2 NAME		,
STREET ADDRESS	FT. LAUDERDALE FL				T ADDRESS	
CITY-ST-ZIP TITLE	ST		DELETE	1.4 CITY - 2.1 TITLE	ST-ZIP	☐ Change ☐ Addition
NAME	YONGE, HOPE L	<u> </u>	DELETE	2.1 HILE 2.2 NAME		Citalige
	A40 CW OTH TERRACE			1		
STREET ADDRESS	FT. LAUDERDALE FL				T ADDRESS	
CITY-ST-ZIP	TT. CAODENDACE TE		DELETE	2. 4 CITY- 3.1 TITLE	SI-ZIP	Change Addition
TITLE NAME	1	_	, OLLLIE			
STREET ADDRESS				3.2 NAME	, topocce	
					T ADDRESS	
CITY-ST-ZIP TITLE			DELETE	3.4. CITY - 4.1 TITLE	31-ZIP	Change Addition
NAME		_	OLLETE	4. 2 NAME		
STREET ADDRESS	1				T ADDRESS	
				•	[
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - : 5.1 TITLE	51-217	☐ Change ☐ Addition
NAME		L.—				Communication Communication
	i					
STREET ADDRESS	1			5.2 NAME	LADDOCCC	
CITY-ST-ZiP				5.3 STREE	1 ADDRESS	
			DELETE	5.3 STREE 5.4 CITY -		Change Maddition
TITLE			DELETE	5.3 STREE 5.4 CITY - 6.1 TITLE		Change Addition
NAME			DELETE	5.3 STREE 5.4 CITY - 6.1 TITLE 6.2 NAME	ST - ZIP	Change Addition
			DELETE	5.3 STREE 5.4 CITY - 6.1 TITLE 6.2 NAME	ST-ZIP	Change Addition

14. Thereby 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 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.