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

**PROFIT CORPORATION ANNUAL REPORT** 1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000018174 (1)

BAY FOOD BROKERAGE, INC.

FILED
May 05 1998 8:00am
Secretary of State

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TH TT

Principal Place of Business Mailing Address  1211 N. WESTSHORE BLVD. 1211 N. WESTSHORE BLVD.					-{	
SUITE 511	onune buvu.	SUITE 511	TAMPA FL 33607			
TAMPA FL 33	807					DO NOT WRITE IN THIS SPACE
US		US				3. Date Incorporated or Qualified
2. Principal P	ace of Business	2a. Mailing Address				03/10/1993 4. FEI Number Applied For
21		26				59-3169433 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				¢0.75 Augustand
22		27	27			5. Certificate of Status Desired Fee Required
City & State	)	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry	1	8. This corporation owes or has paid the current year Intangible
24	25 Name and Address of Curre	29 ant Registered Agent	30			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
	_ <del></del>	on nogistored Agent		81	Name	IV. Issuid and Courses of How Hogistered Agent
	FFEN, CHRISTOPHER N. FRANKLIN ST.					
	TE 2100			82	Street Addre	ess (P.O. Box Number is Not Acceptable)
	MPA FL 33602			83	<del> </del>	
] ''	MFA 1 E 0000E					
				84	City	FL 85 Zip Code
11. Pursuant	o the provisions of Sections 607.05	502 and 607 1508, Florida Sta	atutes, the at	0000	e named corpo	oration submits this statement for the purpose of changing its registered
office or re	<b>egistere</b> d agent, or both, in the Sta m <b>fam</b> iliar with, and accept the obli	ite of Floridal Such change w igations of, Section 607.0505	as authorized , Florida Stat	d by utes	y the corporations.	ion's board of directors. I hereby accept the appointment as registered
SIGNATURE	,					
	Signature, typed or printed manie of registered a		···	I Age	ont signature required	
12.	OFFICERS A	ND DIRECTORS DELETE	13. 1.1 DT		<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	CHATTERTON CAMMIE S	- Dittit	1.1 III			Change T Vacuum
STREET ADDRESS	\$134 CAREY RD				T ADDRESS	
CITY-ST-ZIP	TAMPA FL				ST-ZIP	
TITLE	CEO	DELETE	21 III		31.51.	☐ Change ☐ Addition
NAME	WOOLEVER, MARK		2.2 NA			,
STREET ADDRESS	13791 80TH AVE N				T ADDRESS	
CITY-ST-ZIP	SEMINOLE FL				ST-ZIP	
TITLE		DELETE	3.1 1(1			Change Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 ST	REET	I ADDRESS	
CITY-ST-ZIP			3.4. CI	TY-S	ST-ZIP	
TOTLE		☐ DELETE	4.1 1)1	LE		Change Addition
NAME			4. 2 N/	AME		
STREET ADDRESS			4 3 ST	REET	T ADDRESS	
CITY-ST-ZIP					ST-ZIP	
TITLE		DELETE	5.1 1)1			Change Addition
NAME			. 5.2 NA		1	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		D OF FT	5.4 CI		ST - ZIP	
TITLE		☐ DELETE	6.1 TIT			Change Addition
NAME			6.2 NA	ME		

6.3 STREET ADDRESS

4-27-98

14. 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 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 trusted 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.