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 # P93000029384 (3)

R & D FOODS, INC.

FILED May 06 1998 8:00am Secretary of State



Malling Address					-		ii Heroo arroi]DIE DIE 10%	
Principal Place of Business Mailing Address									
	IDALL PKWY HTY FL 32404		141 S. TYNDALL PKWY Panama City FL 32404			DO NOT WRIT	E IN THIS S	SPACE	
						3. Date Incorporated or Qualified			
•						04/20/1993			
2. Principal Place of Business 2a. Mailing Address			<u> </u>			4. FEI Number		1	Applied For
21		26	26			59-3177387			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
27						S. Certificate of Status Desired		Fee F	Required
City & Sta	ate	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has			
24	25 9. Name and Address of Cui	29	30]			Personal Property Tax due Jur 10. Name and Address of New F			∐ No
		tent negistered Agent		81	Name	IV. Walle and Address of New Y	iogisto.ou .	-gont	
WILLIAMS, JACK G				\Box					
502 HARMON AVE.				82	Street Address (P.O. Box Number is Not Acceptable)				
PANAMA CITY FL 32401			-	83					
				84	City		FL	85 Zir	Code
office of	nt to the provisions of Sections 607. r registered agent, or both, in the St am familiar with, and accept the ob	ate of Florida. Such change we	as authorized	1 hv	the cornoratio	oration submits this statement for the on's board of directors. I hereby acc	purpose of ept the app	changing ointment a	its registered is registered
SIGNATURE			NOTE: Basishard		nt signature require	d when refreshing)	DATE		
12.	Signature, typed or printed name of registered OFFICE RS	AND DIRECTORS	13.	า หมือเ	III signature radime	ADDITIONS/CHANGES TO OFF		DIRECTO	ORS IN 12
TITLE	<u> </u>			1.1 TITLE		1,00111011011011011011011011		Change	
NAME	JENKINS, ROGER D			1.2 NAME					
STREET ADDRESS	3015 STATE AVE		1.3 ST	1.3 STREET ADDRESS					
CITY-ST-ZIP	CANADA OFFI		1	1.4 CITY-ST-ZIP					
TITLE				2.1 TITLE				Change	Addition
NAME	JENKINS, DIANE F		2.2 NA	2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS	AAAR ATATE ALE		2.3 ST						
CITY-ST-ZIP	PANAMA CITY FL		2. 4 Ci	ITY-S	ST - ZIP				
TITLE	☐ DELETE			31 TIFLE				Change	Addition
NAME	1		3.2 NA	ME					
STREET ADDRESS	s		3.3 ST	REET	ADDRESS				
CITY-ST-ZIP			3 4. Cľ	ITY-S	ST - ZIP				
TITLE	☐ DELETE 411			TLE				Change	Addition
NAME			4 2 N/	AME					
STREET ADDRESS	s		4.3 STI	REET	ADDRESS				
CITY-ST-ZIP			4.4 C/T	1Y-S1	T-ZIP				
TITLE		DELETE	5.1 TIT					Change	Addition
NAME			5.2 NA	ME					:
STREET ADDRESS	s		5.3 STI	REET	ADDRESS				
CITY-ST-ZIP			5.4 CIT	1Y-S1	T- ZIP			_	
TITLE			6.1 TIT	6.1 TITLE				☐ Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS	s		6.3 STI	REET	ADDRESS				
CITY-ST-ZIP	<u> </u>		6.4 CI3						
44 16	and the state of t	الأمريم ومرد مممام مردانة بالطوياوان الم	Lidar tha ava		tion stated in [Cooling 110 07/3Vi) Florida Statutos	I further or	rtify that th	no information

4. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Fiorida 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 extraction of 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 15 if changed, or on an attachment with an address.

ROLES TENKINS

11.00.99

20.872-9204