

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

FILED

98 MAR -2 PM 12:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P93000041049  
1. Corporation Name

CLASSIC FRESH CUTS, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/10/93

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 1156 Abbott Street		26 1156 Abbott Street		59-3186043		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22 Suite 1250		27 Suite 1250		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23 Salinas, CA		28 Salinas, CA					
Zip		Zip					
24 93901		29 93901		Country		Country	
25 US		30 US					

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Evans, Wanda  
8801 Exchange Dr.  
Orlando, FL 32809

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	P <input type="checkbox"/> DELETE	1.1 TITLE	TS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Klasson, Eric	1.2 NAME	Hilger, James K
STREET ADDRESS	1156 Abbott Street, Suite 1250	1.3 STREET ADDRESS	1156 Abbott Street, Suite 1250
CITY-ST-ZIP	Salinas, CA 93901	1.4 CITY-ST-ZIP	Salinas, CA 93901
TITLE	ST <input checked="" type="checkbox"/> DELETE	2.1 TITLE	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Winslett, Steve	2.2 NAME	Lucas, James I
STREET ADDRESS		2.3 STREET ADDRESS	1156 Abbott Street, Suite 1250
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Salinas, CA 93901
TITLE	AS <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Erickson, Todd V	3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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.

SIGNATURE: *James K. Hilger*

4/2/98 4087581390

CR2E034 (10/97)