FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 6:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000044103(8)

1. Corporation Name: Miyon Food Service Inc.

Principal Place of Business: 2329 28th St. N. St. Petersburg FL. 33713

Mailing Address: ~~2037 Citrus Hill Rd. Palm Harbor FL. 34683~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 6/22/1993
3a. Date of Last Report: 4/26/95

2. Principal Place of Business — 21: 2329 28th St. N.
2a. Mailing Address — 26: 2329 28th St. N.
4. FEI Number: 59-3187977 ☐ Applied For ☐ Not Applicable

22: Suite, Apt. #, etc
27: Suite, Apt. #, etc
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

23: City & State: St Petersburg FL
28: City & State: St. Petersburg FL
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

24: Zip: 33713 — 25: Country: Pinellas
29: Zip: 33713 — 30: Country: Pinellas
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

O'Driscoll Thomas
~~2037 Citrus Hill Road~~
~~Palm Harbor FL. 34683~~

10. Name and Address of New Registered Agent

81 Name: Thomas O'Driscoll
82 Street Address (P.O. Box Number is Not Acceptable): 11370 122nd Ave N.
83:
84 City: Largo FL 85 Zip Code: 34648

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: Thomas M O'Driscoll — Thomas O'Driscoll (Name of Registered Agent required when reinstating) — 4/30/95 (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P/D Tom O'Driscoll ~~2037 Citrus Hill Road~~ ~~Palm Harbor, FL. 34683~~	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	~~Sec/Treas./D~~ ~~Mi O'Driscoll~~ ~~2037 Citrus Hill Road~~ ~~Palm Harbor, FL. 34683~~	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP	☐ Change ☐ Addition 300001485.83 -05/12/95--01054--025 ****200.00 ****200.00
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	Pres/Dir Thomas O'Driscoll 11370 122nd Ave. N. Largo FL 34648	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	Sec/Treas/D Mi Y. O'Driscoll 11370 122nd Ave. N. Largo FL 34648	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Tom O'Driscoll — Thomas M O'Driscoll — 4/30/95 — 813-323-3409
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number