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 JUN 23 AM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000044815 (7)

1. Corporation Name
RMC PACKING, INC.

Principal Place of Business	Mailing Address
1832 NW 55TH AVE. NO. 1 LAUDERHILL FL 33313	1832 NW 55TH AVE. NO. 1 LAUDERHILL FL 33313

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/25/1993
3a. Date of Last Report: 08/18/1994

2. Principal Place of Business	2a. Mailing Address
21 7664 N.W. 5ST BLD#6	26 7664 N.W. 5ST BLD#6
22 Suite, Apt. #, etc. 1-5	27 Suite, Apt. #, etc. 1-5
23 City & State PLANTATION, FLA	28 City & State PLANTATION, FLA
24 Zip 33324 25 Country	29 Zip 33324 30 Country

4. FEI Number: 65-0421631 — ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MILLWARD, MICHAEL J
440 E. SAMPLE RD.
SUITE 207
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	CAIN, RICHARD E	1.2 NAME	100001524641
STREET ADDRESS	1832 NW 55TH AVE., NO. 1	1.3 STREET ADDRESS	-06/27/95--01086--018
CITY-ST-ZIP	LAUDERHILL FL 33313	1.4 CITY-ST-ZIP	****225.00 ****225.00
TITLE	D	2.1 TITLE	☒ Change ☐ Addition
NAME	CANION, MATTHEW	2.2 NAME	
STREET ADDRESS	2981 NW 6TH COURT	2.3 STREET ADDRESS	7664 N.W. 5ST BLD#6 APT#1-5
CITY-ST-ZIP	FT. LAUDERDALE FL 33313	2.4 CITY-ST-ZIP	PLANTATION, FLA 33324
TITLE		3.1 TITLE	☐ Change ☒ Addition
NAME		3.2 NAME	ASST. VICE PRESIDENT
STREET ADDRESS		3.3 STREET ADDRESS	ANDREW CAIN
CITY-ST-ZIP		3.4 CITY-ST-ZIP	8450 N. SHERMAN CIRCLE APT# E-501 MIRAMAR, FLA 33025
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP	T1a 6/23/95	6.4 CITY-ST-ZIP	

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: Andrew Cain ANDREW CAIN 5-18-95 (305)570-3240
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0022378 CP