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PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000044936 (1)

COLORADO CHOICE MEAT CO., #2, INC.

Principal Place of Business Mailing Address 1025 S SEMORAN BLVD 87479 BOHOOLCRAFT LIVONIA MI 48150 STF 1075 WINTER PK FL 32782-5511 3. Date Incorporated or Qualified 3a. Date of Last Report 06/30/1993 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 26 59-3189330 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional [7] 5. Certificate of Status Desired Fee Required 22 27 City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \sum No Country Zip Ζıp 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RAULERSON, JAMES L JR 1025 8 SEMORAN BLVD 82 Street Address (P.O. Box Number is Not Acceptable) STE 1075 83 WINTER PARK FL 32792 84 City 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. RAUlerson, JR **SIGNATURE** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. DELETE Change Addition TITLE PTVS 1.5 THUE RAULERSON, JAMES L JR 1.2 NAME 1025 S SEMORN BLVD #1075 STREET ADORESS 1.3 STREET ADDRESS WINTER PK FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TrTLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP DELETE Change Addition 4.1 THILE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 \$1REET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - 7IP DELETE Change ☐ Addition TITLE 61 THLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 ham 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.

6.4 CITY-ST-ZIP

14. I do 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