SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)



FLORIDA DEPARTMENT OF STATE

	ORPORATION INUAL REPORT		Secretar	Mortham y of State	iono N/C			
DOC 1. Corpor	1996 97 UMENT # P9300	0005908		240	IONS / 4C	<u> </u>		
OAK LEAF FINE FOODS, INC.								
Principal Place of Business Mailing Address								
3004 29TH AVENUE EAST 3004 29TH AVENUE EAST BRADENTON FL 34208								
2 Penn	oal Place of Business	1.0- 14-	N			3. Date Incorporated or Qualified 08/24/1993	3a. Date of Last Report 03/23/1995	
21	at Flace of busiless	2a. Maning A	Address			4. FEI Number	Applied For	
	Apt #, etc	Suite, Ar	ot #, etc			98-0131292 5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & 23	State	City & St	ate			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Z(p 24	Country 25	7 ip		Count 30	ry	Inis corporation has liability for Florida Statutes	Yes No	
	9. Name and Address of Curi	rent Hegistered Age	ent	В	1 Name	10. Name and Address of New Re	egistered Agent	
GARGIULO, ROBERT G ESQ.								
	4301 32ND STREET WEST, SUIT BRADENTON FL 34208	E U-1		8	2 Street Addi	ress (P.O. Box Number is Not Acceptat	o'e)	
	DRADENIUM PL 34206			8	3			
				Я	4 City		85 Zip Code	
					'			
office	or registered agent or both, in the Sta	ate of Florida. Such c	hagge was au	ithorized b	v the coroorate	oration submits this statement for the p on's board of directors. Thereby accep	urpose of changing its registered I the appointment as registered	
agen	t I am familiar with, and accept the ob	iligations of, Section (607.0505, Flor	ida Statute	S	, ,	,,	
SIGNATU	Signature: type a nu printed name of registered.	lagent and the if applicable	41011)	Bagistered A	gent signature region	red when reinstating)	Dati	
12.	OFFICERS :	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE	Р		DELETE	1 1 TITLE			Change Addition	
NAME	HELMSLEY, DAVID H			1.2 NAMI				
STREET ADDR	555. 5511171155 (515)				ET ADDRESS			
CITY-ST-ZIP TITLE	BRADENTON FL 34208		DELETE	1.4 City 2.1 TiTLE			Channa Addition	
NAME			j bettre	21 IIILE 22 NAMI			Change Addition	
STREET ADDR	800				ET ADDRESS			
CITY-ST-ZIP					·ST ZIP			
TITLE			DELETE	3 1 TITLE			Change Addition	
NAME				3 2 NAM	=			
STREET ADDR	ESS			3 3 STRE	ET ADDRESS			
CiTY - ST - ZIP			Г	3.4 CITY	- S1 - ZIP			
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CITY - ST - ZIP				5 4 CITY				
TITLE			DELETE	6 1 TITLE			Change Addition	
NAME				6 2 NAMI				
STREET ADDR	ESS			63STRE	ET ADDRESS			
CATA OF THE				0.4.0114	01.20			

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)(k). 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPES OF PHINTED YAME OF SIGNING OFFICER OR DIRECTOR

941-9257262 Onytoric Prione #