May 06, 1999 8:00 am Secretary of State

05-06-1999 90098 037 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000059095

1. Corporation Name

Principal Place of Business

IVANHO FOOD ENTERPRISES OF BAYSIDE, INC.

401 BISCAYNE BLVD S 219		7501 DADE:LAND MALL FC3							00105		
MIAMI FL 33132		MIAMI FL 33156				DO NOT WRITE IN THIS SPACE					
บร		U\$ 				3. Date Incorporated or Qualifed 08/19/1993					
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Numb	er	·· -		Appl	ied For
21		26	26			65-0439	201		П	Not /	Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.	<u> </u>						\$8.7	5 Ad	ditional
22	•	27	27			5. Certificate	of Status Desired		Fee	Requ	uired
City & State City & State						6. Election C	ampaign Financing		\$5.0	00 м	ay Be
23	_	28	28				Contribution	, \Box		led to	
Zip	Country Zip Co			ry			ration owes the cu	rrent vear Int	angible		
24	25 29 30			Personal Property Tax.						JNo	
9. Name and Address of Current Registered Agent				_			Address of New	Registered	Agent		
	p. Italiic and Addition 5. Out	Territories agent	8	1	Name						
но	IVAN R								_		
	DADELAND MALL		82 Stree			nt Address (P.O. Box Number is Not Acceptable)					
MIAI	MI FL 33156		8	3							
			8-	4	City				85 2	Zip Co	de
								<u>FL</u>			
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statute ate of Florida. Such change was au	s, the abou	ve-	-named corporation	poration submits the	nis statement for the	e purpose of ept the appoi	changing ntment a	jits re s real:	egistered stered
agent. I a	m familiar with, and accept the ob	oligations of, Section 607.0505, Flori	ida Statute	s.	no corporatio	on a board or an a					
SIGNATURE	Signature, typed or printed name of registered					ed when reinstating)		DATE			
12.		AND DIRECTORS	13.	_		ADDITIONS	CHANGES TO	FFICERS AN	ID DIREC	CTOR	S IN 12
TITLE	D	☐ DELETE	1.1 TITLE	:					Chan	nge	Addition
NAME	HO, IVAN R		1.2 NAME						•		
	730 SOUTH SHORE FL				ADDRESS 75	SOL DAD	ELAND A	1ALL F	C 3		Į
STREET ADDRESS					ADDRESS .	M.A	FL 3	715/]
CITY-ST-ZIP	MIAMI BEACH FL	∩ DELETE	1.4 CITY- 2.1 TITLE		· ZIP	ITIAMI		21.25	☐ Char	108	Addition
TITLE		C OELLIC			}					·a-	
NAME			2.2 NAME		ĺ						1
STREET ADDRESS			1		ADDRESS						1
CITY-ST-ZIP			2. 4 CITY		r-ZIP				(7)		Addition
TITLE		☐ DELETE	3.1 TITLE	i					Char	ige	Addition (
NAME			3.2 NAME	E							
STREET ADDRESS			3.3 STRE	ET,	ADDRESS						
CITY-ST-ZIP			3.4. CITY	ST	r-ZIP						
TITLE		☐ DELETE	4.1 TITLE	:					Char	nge	Addition
NAME			4, 2 NAM	Ε							
STREET ADORESS			4.3 STRE	ET/	ADDRESS						
CITY-ST-ZiP			4.4 CITY-	ST.	:-ZIP						
TITLE		☐ DELETE	5.1 TITLE	_					Char	nge	Addition
NAME			5.2 NAME	Ξ	{						-
STREET ADDRESS			5.3 STRE	EΤ	ADDRESS						1
			5.4 CITY-	ST-	:-ZIP						ļ
CITY-ST-ZIP		DELETE	6.1 TITLE	-					Char	nge	Addition
	/	· //	6.2 NAME	E					_	-	
NAME	/	α / \	1		ADDRESS						\
STREET ADDRESS	/	ν ν λ	0.3 3 IKE	.c.	ADDITION						

SIGNATURE:

14. I hereby certify that the information supplied will indicated on this annual report or suppliemental officer or director of the corporation of the recul

Block 12 or Block 13 if changed, or

CITY-ST-ZIP

g does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information poor is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an speed empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in