FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P93000067902	(5)
◆ Corporation Name		•

BACCHUS FINE FOODS LTD., INC.



						-			H ODDIT HUBI GODI
Principal Place o	of Business	Mailing Address							
920 A S.W. 82	NO AVE	7631 S W 64TH COURT	T						
N/A MIAMI FL 33144 US			N/A Miami Fl 33143 US			D. O.	Jan Data	of Last F	Renort
									1/1995
2. Principal Plac	be of Business	2a. Mailing Address				4, FEI Number			Applied For
1		26				65-0439906		60.7	Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required
2		27				5 Clastics Composing Eigencing			00 May Be
City & State	Oity & State	/ & State			Election Campaign Financing Trust Fund Contribution			ed to Fees	
23		Zip	Coun	itrv		8. This corporation has liability for	ntangible ta	x under s	s 199.032,
Zip 33	Country 25	29	30	,		Florida Statutes Yes	□ No		
24	9. Name and Address of Curren		17-1			10. Name and Address of New R	egistered	Agent	
	0. 1101111		8	81	Name				
HITADDA	AGA, JORGE		h	B2	Street Addre	ss (P.O. Box Number is Not Acceptal:	ile)	·····	
	64TH CT								
MIAMI FL				83					
HINVIAN L.	. 00110		l _a	84	City			85 2	Zip Code
					•	ation submits this statement for the pu d of directors. I hereby accept the app	FL		
	Signature typed or printed name of registered agen OFFICERS AN	and title if applicable. NO D DIRECTORS	13.	Agen	t signature required	ADDITIONS/CHANGES TO OFF			
12.	OFFICERS AN	D DIRECTORS	13. 1.1 Til	ti E		ADDITIONS/OF ANGLO TO OF		Change	
TITLE	P 1000C	DECETE	1.2 NAI						
NAME	LUZARRAGA, JORGE 7631 SW 64TH CT				ADDRESS				
STREET ADDRESS	MIAMI FL		1.4 CIT						
CITY-S1-ZIP TITLE	ST	DELETE	2. 1 111					Chang	e 🔲 Addition
NAME	LUZARRAGA, SILVIA		22 NA	ME	ļ				
STREET ADDRESS	7631 S W 64TH COURT		23 518	REET	ADDRESS				
CITY - ST - ZIF	MIAMI FL		2.4 CII	IY-S	ST - ZIP				. Cl testion
TITLE		DELETE	3 † TI	TLF				Chang	e 🔲 Addition
NAME			3.2 NA						
STREET ADDRESS					T ADDRESS				
CITY-S1-7P		part per part	3 4 CI		SI - ZIP			Chang	e Addition
TITLE		☐ DELETE	4.1 TI					e	h-m-l
NAME			4.2 NA		ADDECC				
STREET ADDRESS					1 ADDRESS ST-ZIP				
CITY-ST-ZIP		DELETE	5 1 TI					Chang	ge 🔲 Addition
TITLE		Ljouen	52 NA						
NAME					T ADORESS				
STREET ADDRESS			ľ		ST-24P				
CHY-S1-ZIP		DELETE	6.1 T			A A A A A A A A A A A A A A A A A A A		Chang	ge 🔲 Addition
TITLE			6 2 N/						
NAME emperiannesse					1 ADDRESS				
STREET ADDRESS			6.4 CI	ITY -	S1 - ZIP		0.07/0.51		-1. dan (44)
CITY-ST-ZIP	and that the information surphier	with this filed is voluntarily fu	mished and	doe	es not qualify t	for the exemption stated in Section 11	9.07(3)(k), F	lorida Sta	atutes, I further

I. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 1.00 (but not not 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 certify 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 of on an attachment with an address.

SIGNATURE:

UNE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 (305)665-8029

R2E034 (12/95