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Apr 08 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000070708 (1)

1. Corporation Name

TREVI FOODS DISTRIBUTORS, INC.



Principal Place of Business 2801 NW 125TH ST. MIAMI FL 33167	Mailing Address 2801 NW 125TH ST. MIAMI FL 33167-2514
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3. Date Incorporated or Qualified 10/12/1993  
3a. Date of Last Report 05/01/1996

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29
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4. FEI Number 65-0492418	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BLANCO, SANTIAGO 2801 NW 125TH ST. MIAMI FL 33167	
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	DIOGUARDI, VINCENZO
STREET ADDRESS	AV. RAFAEL RANGEL, QTA LA CIMA
CITY - ST - ZIP	SANTA FE CARACAS VENEZUELA
TITLE	D <input type="checkbox"/> DELETE
NAME	DIOGUARDI, LUCIO
STREET ADDRESS	AV. LA MESETA RES. LA CUMBRE AP. 2AC
CITY - ST - ZIP	SANTA ROSA DE LIMA CARACAS
TITLE	D <input type="checkbox"/> DELETE
NAME	SEMIDEY, LUIS E
STREET ADDRESS	CALLE A-3 QTA. FANFATILITA
CITY - ST - ZIP	SANTA ROSA DE LIMA CARACAS
TITLE	D <input type="checkbox"/> DELETE
NAME	PALAZZASE, GIOVANNI
STREET ADDRESS	AV. LOS SAMANES, RES LOS SAMANES AP. 5C
CITY - ST - ZIP	LA FLORIDA CARACAS, VENEZUELA
TITLE	D <input type="checkbox"/> DELETE
NAME	SPORTIELLO, MICHELE
STREET ADDRESS	AV. MANAURE SECTOR J. QTA
CITY - ST - ZIP	CHIRIMENA MACARACUAY CARACAS
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET 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 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 in an attachment with an address.

SIGNATURE:  SANTIAGO BLANCO - CARACAS 04/04/97 305-769-0799  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)