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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000075119 (6)

FILED Jan 29 1998 8:00am Secretary of State

BLUE PLATE FOOD PROCESSOR, INC. Principal Place of Business Mailing Address 9733 N.W. 4TH LANE 9733 N.W. 4TH LANE MIAMI FL 33172 MIAMI FL 33172 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/29/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0446204 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DEL PINO, RAFAEL 9733 N.W. 4TH LANE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33173** 83 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature require OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change ☐ Addition DEL PINO, RAFAEL NAME 1.2 NAME 9733 N.W. 4TH LANE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE SVD 2.1 TITLE DEL PINO, JOSE NAME 2.2 NAME STREET ADDRESS 9733 N.W. 4TH LANE 2.3 STREET ADDRESS MIAMI FL 33172 CITY - ST - ZIP 2. 4 CITY - ST- ZIP TITLE ☐ DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TIT) F 41 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE Change 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I 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 on an attachment with an address.

SIGNATURE: Hafael del Perio UIRPARS DIRAFOR

1/22/98

CR2E034 (10/97