

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

FILED
Jun 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000086394 (2)

1. Corporation Name
A-1 FOODS, INC.



Principal Place of Business 7832 W. SAMPLE RD. MARGATE FL 33063	Mailing Address 7832 W. SAMPLE RD. MARGATE FL 33063
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 12/13/1993	
25		30		4. FEI Number 65-0461686	
25		30		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SHAHID, KAMAL M. 7832 W. SAMPLE RD. MARGATE FL 33063		10. Name and Address of New Registered Agent 81 Name ZAHID ANWAR 82 Street Address (P.O. Box Number is Not Acceptable) 7832 W. SAMPLE RD. 83 84 City MARGATE FL 85 Zip Code 33063	
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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 ZAHID ANWAR ZAHID ANWAR 06-01-98
Signature typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent's signature required when reinstalling) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME SHAHID, KAMAL M.	1.1 TITLE ANWAR, ZAHID	1.2 NAME PRESIDENT
STREET ADDRESS 7832 WEST SAMPLE RD	CITY-ST-ZIP MARGATE FL	1.3 STREET ADDRESS 7832 W. SAMPLE RD	1.4 CITY-ST-ZIP MARGATE, FL. 33063
TITLE S	NAME KHAN, NAUMAN A.	2.1 TITLE	2.2 NAME
STREET ADDRESS 7832 S. SAMPLE RD.	CITY-ST-ZIP MARGATE FL	2.3 STREET ADDRESS 7832 W. SAMPLE RD	2.4 CITY-ST-ZIP MARGATE, FL. 33063
TITLE	NAME	3.1 TITLE	3.2 NAME
STREET ADDRESS	CITY-ST-ZIP	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS	CITY-ST-ZIP	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS	CITY-ST-ZIP	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS	CITY-ST-ZIP	6.3 STREET ADDRESS	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, or on an attachment with an address.

CR2E034 (10/97)