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

**PROFIT** CORPORATION ANNUAL REPORT

1998



Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P93000086828 (9)

PAPA'S SAUCES, INC.

CITY-ST-ZIP

**FILED** May 01 1998 8:00am Secretary of State

Principal Place	e of Business	Mailia	ng Address								
9861 PLUMMER ROAD 9661 PLUMMER ROAD											
JACKSONVIL	LE FL 32219	JAC	XSONVILLE FL 322	19			ł	DO NOT WRITE IN T	HIS SPACE		
							ļ	3. Date Incorporated or Qualified 12/20/1993			
2. Principal P	lace of Business	2a. M	lailing Address		-			4. FEI Number		App	lied For
21		26						59-3213029			Applicable
Suite, Apt.	₩, etc.	27 S						5. Certificate of Status Desired			dditional juired
City & State	9	—	City & State				]	6. Election Campaign Financing			Лау Ве
23	Country	28		Cour	atru.			Trust Fund Contribution			Fees
Zip	25	29 2	- ·					<ol><li>This corporation owes or has paid the Personal Property Tax due June 30.</li></ol>	ie current year Yes	r Intai	
24)	9. Name and Address of Curr		ed Agent	1301	• •			10. Name and Address of New Registe			
Si	IAW, FAYE			1	81	Name					
96	61 PLUMMER ROAD			Ī	82	Street Ac	dres	s (P.O. Box Number is Not Acceptable)	<u></u>		
1	61 PLUMMER ROD CKSONVILLE FL 32219				83						
34	CHOOMAILLE FL 32218										
					84	City		!	FL  85   4	Zip Co	ode
agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Stam familiar with, and accept the ob-	502 and 607 ate of Florida ligations of, S	.1508, Florida Statu Such change was Section 607.0505, F	ites, the ab authorized lorida Statu	ove by stes	-named corpo the corpo	orpora iration	ation submits this statement for the purpon's board of directors. I hereby accept the	ose of changir e appointment	g its as re	registered egistered
SIGNATURE	Signature, typed or printed name of registered	agent and title if a	pplicable (NC	TE Registered	Aper	ni signatura re	quired :	when reinstating) DA	ATE		
12.		AND DIRECT		13.				ADDITIONS/CHANGES TO OFFICERS			
TITLE	P		☐ DELETE	1.1 T/T	LE				Chan	ge	☐ Addition
NAME	SHAW, FAYE			1.2 NAJ	ME						
STREET ADDRESS	9661 PLUMMER ROAD					ADDRESS			•		
CITY-ST-ZIP	JACKSONVILLE FL		Decemen	1.4 CIT		T-ZIP			Chan		Addition
TITLE	STD	<del></del>			2.1 TITLE 2.2 NAME				E Chan	Ac.	[_] Addition
NAME	FEAGLE, WILLIAM L 9661 PLUMMER ROAD				-	ADDRESS					
STREET ADDRESS	JACKSONVILLE FL			2.4 Cf							
CITY-ST-ZIP			☐ DELETE	3.1 TIT		11 - £1F			Chan	ge	Addition
NAME				3.2 NA	ΜŁ						
STREET ADDRESS				3.3 STF	REET	address					
CITY-ST-ZIP				3.4 Cf1	ry-s	T-ZIP					
TITLE			☐ DELETE	4.1 TIT	LE				L Chan	ge	Addition
NAME				4. 2 NA	ME						
STREET ADDRESS						ADDRESS					
CITY - ST - ZIP			DELETE	4.4 CIT		T-ZIP		4.4.1	Chan		Addition
TITLE				5.1 TIT( 5.2 NAI		1			LI Oliasi	An	L_3 Addition
NAME						ADDRESS					
STREET ADDRESS				5.4 CIT		ADDRESS T. 710					
CITY-ST-ZIP			DELETE	6.1 TIT		3 - KIF			☐ Chan	ge	Addition
NAME			<del>-</del>	6.2 NA						_	_
CTREET ADDRESS						ADDRESS					

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.

4/13/98