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 #	P94000006137	(1)
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PRESCO FOOD CORP #13

Principal Place of Business Ma			Mailing Address	Mailing Address			1 sesises in initial paid pour sell sell sells			
504 N. PLANT AVENUE PLANT CITY F: 33566		504 N. PLANT AVENU PLANT CITY F: 33566								
		PLANI CITY F: 33566			3. Date Incorporated or Qualified 01/26/1994 3a. Date of Last Report 03/07/1995					
2. Principal Plac	ce of Busine		2a. Mailing Address				4. FEI Number	+		Applied For
1	· ·		26	├ ──1		00 000 1200			Not Applicable	
Suite, Apt. #,	, etc.		Suite, Apt. #, etc.	-			5. Certificate of Status Desired			5 Additional Required
2			27				A Fig. 12 Complete			
City & State		City & State		Election Campaign Financing Trust Fund Contribution)0 May Be ed to Fees			
3	···-		28		intry		8. This corporation has list-lility for	intand ble f		
Zip		Country	Zip 29	30	ariti y		Florida Statutes Yes			
4	O Name	and Address of Curre	1 1		Γ		10. Name and Address of New F	Registered	l Agent	
	9, Harrie	and Addition of Comme			81	Name				
DATEL	IAVEOU D				82	Ptroot Add	ress (P.O. Box Number is Not Acceptate	ole)		
	IAYESH R II ANT AVE				02	Queet Add				
504 N. PLANT AVENUE PLANT CITY F; 33566				83						
T LOGITIC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	000			84	City			85	Zip Code
					1	′	ration submits this statement for the pured of directors. I hereby accept the app	FI	_	
	Signature, typed	or printed name of registered auto	nt and the it applicable (I ND_DIRECTORS	NOTE: Registers 13.		et signature require	ADDITIONS/CHANGES TO OF	CIATE FICERS AN	ND DIRECT	ORS IN 12
12.	PD	OF FIGERS A	DELETE		TITLE				☐ Change	e 🔲 Addition
NAME		JAYESH R	-	1,21	NAME					
STREET ADDRESS		PLANT AVENUE		1.3	STREE	I ADDRESS				
CITY-ST-ZIP		CITY F; 33566		1.4	CITY	S1 - 7IP			<u> </u>	Addition
TITLE	VSD		DECETE	2 1	MUE				☐ Chang	e 🔲 Addition
NAME		, SANDIP R		.	NAME	- !				
STREET ADDRESS		PLANT AVENUE				1 ADDRESS				
City - St - ZIP		CITY F; 33566	☐ DELETE			ST-Z-P			[] Chang	e Addition
TITLE	TD	DII 10 D			TITLE NAME					
NAME		, DILIP R				ET ADDRESS	,			
STREET ADDRESS		PLANT AVENUE CITY F; 33566		1		S1 - ZIF				
CITY-ST-ZIP	FLANI	OH F, 33300	☐ DELETE		TITLE		W		Chang	je 🔲 Additio
NAME			-	4.2	NAME					
STREET ADDRESS				4.3	STREE	FADDRESS				
CITY-ST-ZIP				44	CITY	S1 - ZIF				
TITLE	<u> </u>		DELETE	5	TITLE				☐ Chang	ge 🔲 Additio
NAME				5.2	NAME	:				
STREET ADDRESS				5.3	STRE	ET ADDRESS				
CITY-S1-ZIP	<u>L</u> .					-SI-ZIP			Chan	pe
TITLE			DELETE		1 THTL	1			☐ Ollani	85 T Worth
NAME	1			6.2	NAM	E				

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 enipowered 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.

63 STREET ADDRESS

6.4 CITY - \$1 - ZIP

STREET ADDRESS

CR2E034 (12/95)