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Jun 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000024866 (3)

1. Corporation Name
A & C FOOD SERVICES, INC.



Principal Place of Business
3000 34 ST SOUTH
#M1
ST PETERSBURG FL 33711
US

Mailing Address
3000 S 34 ST
#M1
ST PETERSBURG FL 33711-3833
US

2. Principal Place of Business
21 565-26th Ave. S.E.

2a. Mailing Address
26 P.O. Box 11078

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 St. Petersburg, FL.

28 St. Petersburg, FL.

Zip

Country

Zip

Country

24 33705

25 Pinellas

29 33733-1078

30 Pinellas

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALSUP, ALAN R
3000 S. 34 ST.
#M1
ST PETERSBURG FL 33711

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
565-26th Ave. S.E.

83

84 City

St. Petersburg,

FL

85 Zip Code
33705

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 required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME ALSUP, ALAN R
STREET ADDRESS 3000 S 34 ST #M1
CITY-ST-ZIP ST PETERSBURG FL

TITLE D
NAME SNELL, THOMAS
STREET ADDRESS 3000 S 34 ST #M1
CITY-ST-ZIP ST PETERSBURG FL

TITLE D
NAME LOCKETT, RICKY
STREET ADDRESS 3000 S 34TH ST #M1
CITY-ST-ZIP ST PETERSBURG FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME
1.3 STREET ADDRESS 565-26th Ave. S.E.
1.4 CITY-ST-ZIP St. Petersburg, FL 33705

2.1 TITLE S/T
2.2 NAME
2.3 STREET ADDRESS 565-26th Ave S.E.
2.4 CITY-ST-ZIP St. Petersburg, FL. 33705

3.1 TITLE V
3.2 NAME
3.3 STREET ADDRESS 565-26th Ave. S.E.
3.4 CITY-ST-ZIP St. Petersburg, FL. 33705

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 on an attachment with an address.

SIGNATURE: [Signature] DATE: 4-25-97 PAA-301-2271

CR2E034 (9/96)