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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000062993 (8)

FILED May 08 1998 8:00am Secretary of State

POMPANO PASTA, INC.										
Principal Place of Business Mailing Address 2190 N. FEDERAL HVY 1990 E. SUNRISE BLVD. POMPANO BEACH FL 33060 FORT LAUDERDALE FL 33304										
POMPANO BEACH FL 33060 FORT LAUDERDALE FL 33304										
US									DO NOT WRITE IN THIS SPACE	
									3. Date Incorporated or Qualified	
-	Dringing D	loop of Busi	DODD	On Mailton	Addroom			··	08/23/1994 4. FEI Number Applied For	
	2. Principal Place of Business			₁	2a. Mailing Address				Trippilou / Ci	
21	Suite, Apt.	#. etc		26 Suite A	Apt. #, etc.				65-0521927 Not Applicable \$8.75 Additional	
22		27							5. Certificate of Status Desired Fee Required	
	City & State								6. Election Campaign Financing \$5.00 May Be	
23					28				Trust Fund Contribution Added to Fees	
	Zip		Country	Zip		Count	ry		8. This corporation owes or has paid the current year Intangible	
24		·	25	29		10			Personal Property Tax due June 30. 🔀 Yes 🗌 No	
			and Address of Cur	rent Registered Aç	gent				10. Name and Address of New Registered Agent	
						8	1 Na	ame		
1990 E. SUNRISE BLVD.							reet Addre	Address (P.O. Box Number is Not Acceptable)		
			.							
	FT.	LAUDERD/	ALE FL 33304			8:	3			
						8	4 Ci	ty	85 Zip Code	
-22							_i	·	FL	
31.	• Pursuant t • office or re	io ine provis egi s tered ac	sions of Sections 607.0 gent, or both, in the Sta	ড02 and 607.1508, ate of Florida, Such	Florida Statutes change was au	, the abo thorized t	ve-nai	med corpo corporatio	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	
agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.								,		
SIG									P. 18	
12.		Signature, types	OFFICERS A	agent and the it applicable AND DIRECTORS	c (NUIE	13.	gent sig	nature required	ed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
		DP DP		THE PARTY OF THE	DELETE	1.1 TITLE		D.v	VP ₁ S	
NAN	AE I	CASTEL	LLANO, PAUL		_	1,2 NAME		' '		
STR	EET ADDRESS		SUNRISE BLVD.			1.3 STREE		RESS		
CITY	r-ST-ZIP	FORT L	AUDERDALE FL			1.4 CITY-				
TITL		DVP	······································		DELETE	2.1 TITLE			P. 7 Change Addition	
NAM	AE	CASTEL	JLANO, JOE		2.2 N			Cas	P, T Change Addition	
STR	EET ADDRESS	1990 E.	SUNRISE BLVD.			2.3 STREE	T ADDR	l l		
CITY	-ST-ZIP	FORT L	AUDERDALE FL			2.4 CITY	- ST - ZIF	,		
TITL	E				DELETE	3.1 TITLE			☐ Change ☐ Addition	
NAM	Gity 8 State Zip					3.2 NAME				
STR	EET ADDRESS					3 3 STREE	T ADDR	ESS		
CITY	-ST-ZIP					3.4. CITY	ST-ZIF	,		
TITL	E				DELETÉ	4.1 TITLE			☐ Change ☐ Addition	
NAM	IE					4. 2 NAM	E			
STR	EET ADDRESS					4.3 STREE	t addr	ess		
CITY	-ST-ZIP					4.4 CITY -	SI-ZIP			
TITL				ı	DELETE	5.1 TITLE			☐ Change ☐ Addition	
NAM						5.2 NAME				
						5.3 STREE	T ADDR	ES\$		
					DELETE.	5.4 CITY -	ST-ZIP			
TITL	i			L	DELETE	6.1 TITLE			L Change L Addition	
						6.2 NAME				
						6.3 STREE				
		ertify that the	o information envolved	with the files doe	s not qualify for	6.4 CITY-			Section 110 07(2Vi) Florida Statutos Lituribar portifu that the information	

Thereby verify that the information for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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 tradee 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.