## 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

P94000071435 (9)

DOCUMENT # 1. Corporation Name T.V. DINNERS, INC. FILED Mar 25 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address		- A COULDON HIM INNI DEDIN MUNIC MENAL D	BILL BOLL HOLD, INDIA BIRAD OLIDI BILL HODE	
8123 NW 607	rh ST	8123 NW 60TH ST				
MIAMI FL 33166		MIAMI FL 33166	• • • • • • • • • • • • • • • • • • • •			
US		U\$	U\$		DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified		
9 Principal P	lace of Business	2a. Mailing Address		09/28/1994 4. FEI Number	Annihad Sax	
21	Idog Oi Edsilloss	26		65-0553000	Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	··· <del>·····</del>		CO 75 Addition	
22		27		5. Certificate of Status Desired	Fee Required	
City & State	θ	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has p	· ·	
24	[25]	29	30	Personal Property Tax due June		
	9. Name and Address of Co	urrent Hegistered Agent	81 Name	10. Name and Address of New Ro	agistered Agent	
	AB\$KI, J.D.		Name J	MES C. KEIL	4	
6425 MATU SI 82 Street Address (P.O. Box Number is Not Acceptable)						
MIAMI FL 33023						
			10720	WASHINGTON	ST	
			84 50V	ales D =s	<b>85</b> Zip Code	
11 Durauant	to the provisions of Sections 60'	7 0502 and 807 1508 Ellerida Statut	TEMBIC	viction submits this statement for the		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Excide Statutor, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, if the State of Plorida. 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 60.0536, Florida Statutes.						
	m tamiliar with, and accorpt the	obligations of Section 60 .0505, Flo	orida Statutes.		3/2/10	
SIGNATURE	Signature, viped or purified name of repister	od agont and title if applicate (NOTE	: Registered Agent signature required	1 when reinstating)	DATE DATE	
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE	PT	DELETE	1.1 TITLE		Change Addition	
NAME	Grabski, J. Derek		1.2 NAME			
STREET ADDRESS	6425 MAYO STREET		1.3 STREET ADORESS			
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP			
TITLE	VPS	DELETE	2.1 TITLE		Change Addition	
NAME	REILLY, JAMES C		2.2 NAME			
STREET ADDRESS	8123 NW 60TH ST		2 3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL	I De Fre	2. 4 CITY - ST - ZIP			
TITLE		∟ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition	
NAME		FT NEUT	4.1 ITILE 4.2 NAME		Thousande Thymonillott	
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			53 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP		4	6.4 CIDY - ST-ZIP			
14. I hereby c	ertify that the information suppli	ed with this filing does not qualify fo	r the exemption stated in S	ection 119.07(3)(i), Florida Statutes. I	further certify that the information	
14. I hereby certify that the information supplied with this filing does not quality 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 people 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 of trustee empewered 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 a address.						