FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P94000079176 (1) DOCUMENT #

1. Corporation Name

PAL FOOD SERVICES, INC.

Principal Place of Business	Mailing Address
237 NW 20TH ST MIAMI FL 33127	237 NW 20TH ST MIAMI FL 33127



Principal Place of	f Business	Mailing Address						
237 NW 2011 MIAMI FL 33		237 NW 20TH ST Miami FL 33127						
					3. Date incorporated or Qualified 10/27/1994	3a. Da	te of Last 01/24/	
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Number			Applied For
The part lade of Edented		26	··· ₁		65-0529772			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			75 Additional e Required
City & State		City & State			6. Election Campaign Financing			00 May Be
23 28					Trust Fund Contribution			ded to Fees
Zip	Country	Zip	Countr	ý	8. This corporation has liability for Florida Statutes	intangible No	tax under	s 199.032,
4	25	[29]	30		10. Name and Address of New F		d Agent	
	9. Name and Address of Curre	nt Hegisterea Agent	81	Name	10. Name and Address of New .			
	ALL ALLANDALAAD		L	' ' '	(D.O. F) N. N. who is Not Associate	via)		
HADABAH, GHANEM-SAD 9700 ATLANTIC DR. MIRAMAR FL 33054			82	Street Ad	Address (P.O. Box Number is Not Acceptable)			
			83	3				
			84	1 City		F	85	Zip Code
	200,000	007 4500 Flerido Ptob	too the obesis	named con	poration submits this statement for the public and of directors. Thereby accept the app	roose of c	hanging it	s registered office
SIGNATURE	Signature, typod or printed name of registered ago: OFFICERS Af	ND DIRECTORS	OTE: Registered Ag	ont signature reck	ired when reinstating) ADDITIONS/CHANGES TO OF	DATE TICERS AI		
TITLE	TS	DELETE	1. 1 Till L		·		Chang	ge 🔲 Addition
NAME	HADDABEH, GHANEM-SA	ID	1.2 NAMI	£				
STREET ADDRESS	9700 ATLANTIC DR.		1.3 STRE	E1 ADDRESS				
CITY-ST-ZIP	MIRAMAR FL		1.4 CITY	- ST · ZIP				- El Addition
TITLE	P	☐ DELETE	2 1 TITL	E			☐ Chang	ge
NAME	SHIHADA, RAIDA Y		2.2 NAM	E				
STREET ADDRESS	C/O 237 N.W. 20TH ST.		2 3 STRE	E1 ADORESS				
CITY-ST-ZIP	MIAMI FL 33,127			- ST · ZIF			[□ Chan	ge FIL Kodition
TITLE	V. Prendent	& DIRECTURIES	3 1 1/10	i			L. Chan	ge Control
NAME	DARBH-FL-+	HADDAD .	3.2 NAM			•		
STREET ADDRESS	2750 River Run	Temu		EET ADDRESS				
CITY-ST-ZIP	MIRAMAR	FL 33157		-SI-ZIP			[] Chan	ge
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NAME			4.2 NAM					
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NAME				EFT ADDRESS				
STREET ADDRESS				Y-ST-ZIP				
CITY-S1-ZIP			0.4 UI	1-01-61		0.07(0)(1)	Étadala C	talutas I further

14. Ido 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 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:

Laner Hadlo Het

Daytime Phone #