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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

May 06 1997 8:00am

Secretary of State

DOCUMENT # P9500006178 (4)

ANGUS WHOLESALE MEATS, INC.

Principal Plac	e of Business	Mailing Address				A CONTINUE THE SOLEY BILLS AND CONTINUENCE OF STATE OF ST			
5274 W DUNNELLON RD DUNNELLON FL 34433		5274 W DUNNELLON RD DUNNELLON FL 34433-2624							
DOMNIECCOM P	L 01100	DOMNELLON FE STANSE	UE 4			Date Incorporated or Qualified 01/24/1995		te of Last	
2. Principal P	lace of Business	2a. Mailing Address 26			4. FEI Number 59-3291763	Applied For Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5, Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Stat	6	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	25 29		Oountry 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
114	g. Name and Address of Curren	t Registered Agent				10. Name and Address of New Reg	jistered /	Agent	
	TON, DARRELL L		•	11	Name				
	4 W DUNNELLON RD NNELLON FL 34433		E	2	Street Add	ress (P.O. Box Number is Not Acceptab	(e)		
יוטטי	AMELLUM PL 34433		l.	3					
				4	City		FL		p Code
11. Pursuant office or r	to the provisions of Sections 607.050, egistered egent, or both, in the State in familiar with, and accept the oblica	2 and 607.1508, Florida Statu of Florida. Such change was	ites, the abo authorized	by	-named corp the corpora	poration submits this statement for the pition's board of directors. I hereby accep	irpose of t the app	changing pintment) its registered as registered
SIGNATURE	Makalla	See Pre					//2	9/9	7
12.	Signal Crypted or printed nank of regisled diagnostic OFFICERS AND			/gar	it signature requi	red when reinstating)	DATE	DIDEOT	200 (1) 40
TITLE	P DELETE		1 3. 1.1 Till Li	 F	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC	ERS AND	☐ Change	
NAME	LINTON, DARRELL L		1,2 NAM					L onding	1
STREET ADDRESS 5274 W DUNNELLON RD			1.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	DUNNELLON FL 34433		1.∳ CITY	- 51	- 71P				
TITLE		DEFEIE	2.1 TITLE					Chang	e Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 S1RE	ET A	ADDRESS				
CITY-ST-ZIP		☐ 05(£1£	2 # CITY-\$1-ZIP		1-7IP			<u> </u>	
TITLE NAME		L] DELETE	DLUETE 3.1 TITLE 3.2 NAME					Changi	e [] Addition
	rreet address			3 \$ STREET ADDRESS					
	MTY-ST-ZIP		3.4 CITY-ST-ZIP		1				
TITLE	☐ DELETE			4.1 TITLE				Change	Addition
NAME			4. 2 NAM	4E					
STREET ADDRESS			4.3 STRE	E1 #	ADDRESS				
CITY-ST-ZIP			4.4 CITY		- ZIP				
MILE		DELETE						∐ Change	Addition
NAME			5.2 NAM						
STREET ADORESS					ADDRESS				
CITY-ST-ZIP TITLE	DELETE		5.4 CHY 6.1 THU	1Y-S1-7IP		The second secon		Change	Addition
NAME			6.3 NAM					L. John M.	, L_F noutible
STREET ADDRESS					ADDRESS				
c., , porticoo			O.P. OTTAL						

64 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 comporation 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 12 it clianged, or on an attachment with an address.