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 # P9500038171 (1) KENNY & MARIE'S MOM & POP'S PRODUCE, INC.									
Principal Place of Business Mailing Address								i 141 de 1610 i 1 16 1	10001 U 1 14 1
2840 N.E. 14TH ST. 2840 N.E. 14TH ST. #201-A									
						DO NOT WRITE IN THIS SPACE			
POMPANO BEACH FL 33062		POMPANO BE	POMPANO BEACH FL 33062						
						3. Date Incorporated or Qualified			
Principal Pla	2. Principal Place of Business		ess			05/12/1995 4. FEI Number Applied For			
21		F1	[26]			65-0602269		⊢ +	ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.						Additional
22		27				5. Certificate of Status Desired		Fee R	Required
City & State		City & State				6. Election Campaign Financing	_		May Be
23		28]				Trust Fund Contribution			to Fees
Zip	Country TI	- Zφ.	}— <u> </u>	ountry	,	8. This corporation owes or has p			ntangible No
24	25 Name and Address of Curre	29 sent Registered Agent	30			Personal Property Tax due Jun- 10. Name and Address of New R			
	ONE, KENNETH			81	Namo				
	40 N.E. 14TH ST.			82	Ctroot Ada	Iress (P.O. Box Number is Not Accepta	blox		
	201-A			62	Sireer Add	iress (F.O. box Number is Not Accepta	Ole)		
	MPANO BEACH FL 33062			83					
			84	City	*		85 Zip	Code	
					'		FL	- ' '	
SIGNATURE _	l gnat ure, typed or profest name of region coll r			ered Age		poration submits this statement for the story special points board of directors. I hereby accounted which consisting) ADDITIONS/CHANGES TO OFF	DATE		·
TITLE	D			s. Hille		ADDITIONS/CHANGES TO OFFI	CERS AIN	Change	
NAME	STONE, KENNETH		1.2	MAM S	{				
STREET ADDRESS 2840 N.E. 14TH ST., #201		1-A	1.3 STREET ADDRESS		ADORESS				
CITY-ST-ZIP	POMPANO BEACH FL 33	062	1.4	CHY-S	51 - <i>7</i> 1P				
TITLE	-	()	TET# 21	TITLE				☐ Change	Addition
NAME			: 22	P NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				4 CITY - S	ST-ZIP			Change	Addition
TITLE		[] Di) TITLE				CI cuanta	☐ Wooldon
NAME Street address				2 NAME 2 CTOCCT	ADDRESS				
CITY-ST-ZIP			•	4. CITY-S	ì				
TITLE		D		TITLE	31-211		<u>-</u>	Change	Addition
NAME		_		2 NAME				_ •	
STREET ADDRESS			4.3	3 STREET	ADDRESS				
CITY-ST-ZIP			4.4	CITY-S	ST - ZIP				
TITLE		D 0	LETE 5.1	TITLE				Change	Addition
NAME			5.2	2 NAME					
STREET ADDRESS			5.3	3 STREET	ADDRESS				
CITY-ST-ZIP				4 CITY - S	ST - ZIP			170	
TITLE		□ DI		TITLE				∐ Change	Addition
NAME				P NAME					
STREET ADDRESS			6.3	STREET A COV. S	ADDRESS				
C1TM - C1 - 710			E 6.4						

14. Thereby 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 suppliemental 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 trustice empowered to execute this report as required by Chapter 647, Florida Statutes; and that my name appears in Block 13 jt changed, or on an attay brown with an address.

4/11/9A

0571-9112-5970

FILED

Apr 28 1998 8:00am

Secretary of State