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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000038226 (3)

1. Corporation Name SOUTHEASTERN MEATS INTERNATIONAL, INC.

Maiina Address Principal Place of Business 17927 S.W. 8TH STREET 17927 S.W. OTH STREET PEMBROKE PINES FL 33029 PEMBROKE PINES FL 33029 3a. Date of Last Report 3. Date Incorporated or Qualified 05/11/1995 NA 4. FEI Numiber Applied For 2. Principal Place of Business 2a. Mailing Address 17927 SW8# St 6505812 Not Applicable 17927 SW. 80 St. \$8.75 Additional Suite, Apt #. etc. Pembroke Pines, Florida 5. Cert-ficate of Status Desired PEMBROKE PINES, FloridA Fee Required \$5.00 May Be 6. Election Campaign Financing BROWARD Trust Fund Contribution Added to Fees 3302° BROWARD 23 This corporation has liability for intangible tax under s 199.032 Florida Statutes
Yes □ No Country Z_{10} 30 24 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name P. GATTO Louis ss (P.O. Box Number is Not Acceptable) 今でフィットの、多十・らいによ GATTO, LOUIS P 82 17927 S.W. 8TH STREET 83 PEMBROKE PINES FL 33029 Penbroke Pines Florida 33029 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I neighbors accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1:11 E D CR2E034 1.2 NAME GATTO, LOUIS P NAME 17927 S.W. 8TH STREET 1.3 STREET ADDRESS STREET ACCRESS PEMBROKE PINES FL 33029 1.4 GETY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 2 1 TifleE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 24 CiTY - ST ZiP CITY - ST - ZIP ☐ Change ☐ Addition DELETE 3 1 TITLE DILE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - \$1 - 74° OTY-ST-ZIP 8000017912BF DELETE 4 1 TITLE TIFLE -04/23/96 --01131--034 4.2 NAME NAME ***200.00 4.3 STREET ADORESS STREET ADDRESS 44 CITY ST-ZIP CITY-ST-ZIP Change ■ Addition DELETE 5 1 TIFLE 5.2 NAME NAMS 5.3 STREET ADDRESS STREET ADDRESS 5.4 CIEY - ST - ZIP CITY - ST- ZIP Change Addition DELETE 6 1 TIT. E TITLE 6.2 NAME NAME **ERSTREET ADDRESS** STREET ADDRESS

6.4 C/TY - ST - 7/P

SIGNATURE

CITY - ST - ZIP

LOUIS P. GATTO

4/16/96

14. If do hereby certify that the information supplies with this fling 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 the angle of the composition of the control of the contr

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