FILE NOW: FILING FEE AFTER MAY 1ST IS \$55Q.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1998 8:00am

Secretary of State

Addition

Addition

Change

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000040288 (9)

LOLA'S FOOD PRODUCTS, INCORPORATED

3333 WALLER ST 3333 WALLER ST JACKSONVILLE FL 32254 JACKSONVILLE FL 32254 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/17/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3313624 Not Applicable 26 Suite, Apt. #. etc. \$8.75 Additional Suite, Apt. #, atc. \Box 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DEPANO, CARLOS I JR. 3333 WALLER ST 82 Street Address (P.O. Box Number is Not Acceptable) JACK8ONVILLE FL 32205 83 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutos, 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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Addition TITLE Change 1.1 TITLE HENRY T. DEPANO ing fane DEPANO, CARLOS I JR. NAME 1.2 NAME 7156 PRELLIE ST STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32210 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition BAGSIC, REYNALDO T NAME 2.2 NAME 6314 IAN CHAD DR W STREET ADDRESS 2.3 STREET ADDRESS Jacksonville fl 32244 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ___ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4.2 NAME

14. I 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 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 extraction of the corporation of the cor

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

DELETE

DELETE