SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375. PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** P95000047691 (7) CAESAR'S FOOD, USA, INC., Mailing Address Principal Place of Business 1408 S.W. 13TH COURT 1408 S.W. 13TH COURT POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 3. Date Incorporated or Qualified 3a. Date of Last Report 06/19/1995 Applied For 4 FFI Number 2a. Mailing Address Principal Place of Business 2. Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc. 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 This corporation has liability for intangible tax under s. 199 032, Country Zio Zip Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name TAKACS, PETER Street Address (P.O. Box Number is Not Acceptable) 82 1408 S.W. 13TH COURT POMPANO BEACH FL 33069 63 Zip Code City 85 84 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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 11. DAIE SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and tide if applicable (36/8)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELFTE 1 1 TIFLE TITLE **PTVS** CR2E034 1.2 NAME TAKACS, PETER NAME 1.3 STREET ADDRESS 1408 S.W. 13TH COURT STREET ADDRESS POMPANO BEACH FL 33069 1.4 CIFY - ST - ZIP City - ST - ZIP Change Addition DELETE 2 1 TITLE TITLE 2.2 NAME TAKACS, PETER NAME 1408 S.W. 13TH COURT 2 3 STREET ADDRESS STREET ADDRESS 2 4 CHTY - ST - ZIP POMPANO BEACH FL 33069 CITY-ST-ZIP Change Addition DELETE 31 TIFLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - ZIP CITY-ST-ZiP Change Addition DELETE 4 1 11ftE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CHTY - ST - ZIP CITY-ST-ZIP Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CHY - ST - ZIP CITY - ST - ZIP DELETE 90000190329 61TITLE TITLE -07/24/96--01050--026 6 2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6 4 CITY - ST - ZIP 14. I do 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: