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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF S

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P95000050200 (1)

M & S FOOD AND BEVERAGE CORPORATION, INC.

Principal Place of Business Mailing Address

4420 BLANDING BLVD 3715 MOON FLOWER ROAD
JACKSONVILLE FL 32210 JACKSONVILLE FL 32210-4523
US

## FILED May 02 1997 8:00am Secretary of State



บร					3. Date Incorporated or Qualified	3a. Date	of Last F	Report
:					06/27/1995	05/01		, .
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For		
21 4420 BLANDING BLVD.		26 SAME AS ABOVE		59-3322687		Not Applicable		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Dosired		\$8.75 Additional Fee Required		
City & State	ONVILLE, FL.	City & State		Election Campaign Financing     Trust Fund Contribution	<u> </u>	\$5.00 May Be Added to Fees		
<b>Zip</b> Country		Zip	Country			ability for intangible tax under s. 199.032,		
24 32210			4		Florida Statutes Yes No  10. Name and Address of New Registered Agent			
	9. Name and Address of Current	Hegistered Agent	81	Name	10. Name and Address of New Re	gistered Age	ent	
PERDUE, STEVE				of Name				
3715 MOON FLOWER ROAD JACKSONVILLE FL 32210			82 Street Addr		ldress (P.O. Box Number is Not Acceptal	ble)		
JACI	KSONVILLE PL 32210		83			<del></del>		
			84	City			35 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508 Flouda Statutes	s the abov	e-named co	orporation submits this statement for the	FL '	ancina i	te registered
office or r	egistered agent, or both, in the State of manifer with, and accept the obligations.	of Florida. Such change was au	athorized b	v the corpor	ration's board of directors. Thereby acce	pt the appoin	tment as	registered
SIGNATURE	Signature, typed or printed name of registered agen	cand the flames able (NOTE	Regisiered Ap	ent signal ire rec	guired when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		RECTOR	RS IN 12
TITLE	P\$D	☐ DELETE	1.1 TITLE				Change	Addition
NAME	Perdue, Steve		1.2 NAME					
STREET ADDRESS	3715 MOON FLOWER ROAD		1.3 STREET	ADORESS				
CITY-ST-ZIP	JACKSONVILLE FL 32210		1,4 CITY-5	ST-ZIP				
TITLE	VTD	DELETE	2 1 TITLE				Change	Addition
NAME	110 110 22 111110		2.2 NAME					
STREET ADDRESS	5568 LAMOYA AVENUE, SUITE	A-3	2.3 STREET ADDRESS			47		
CITY-ST-ZIP				S1-ZIP				
TITLE		☐ DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE					
CITY-ST-ZIP TITLE		DELETE	3.4 CHY- 4.1 THE	ST-ZIP		<del>-</del>	Change	Addition
NAME			4.1 HILE				Change	L Addition
STREET ADDRESS				ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	1				
TITLE		DELETE	5.1 THUE	21-21			Change	Addition
NAME			52 NAME	·				
STREET ADDRESS			5.3 STREET	ADORESS				
CITY-ST-ZIP			5.4 CITY- 9	S1-7IP				
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			62 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			64 CHY-5					
14 I do berel	ay partity that the information complied	with this fuing door not qualify	for the ove	marallon stat	od in Section 110 07/3\(i) Florida Statute			41.

To the education 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 eath; 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 attachment with an address.

CIGNATURE.

2-31614P

STEVE PERDUE, PRESIDENT

APRIL 28, 1997 (904)772-7488