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

PROFIT : CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000058550

THE EBESH BUICE COMPANY OF ELOBIDA, INC.

FILED Jul 29, 1999 8:00 am Secretary of State

07-29-1999 90021 027 ***550.00

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Principal Place of Business Mailing Address					4 10031001 (CD 2010) DESIT MATTE ABILI DATE OF SE ALION LEVOL BELLE DATE.
1000 AMERICAN SUPERIOR BLVD. 1000 AMERICAN SUPERIOR B			BLVD.		·
WINTER HAVEN FL 33884 WINTER HAVEN FL 33884					DO MOT MONTE IN THIS STACE
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
	·				07/28/1995
Principal Place of Business Za. Mailing Address				~ ·	4. FEI Number Applied For
21 26					59-3326045 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired See Required
22		27			
City & State	•	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23	28		Country		
Zip	Country			y	8. This corporation owes the current year Intangible Personal Property Tax Yes No
24	25		301		Personal Property Tax. Li Yes Li No 10. Name and Address of New Registered Agent
	9. Name and Address of Curre	nt Registered Agent	81	Name	
DUCEY POIAN				GAYLE HENDERSON	
1000 AMERICAN SUPERIOR BLVD.				Street Ad	dress (F.O. Box Number is Not Acceptable)
	TER HAVEN FL 33884			 	
, 44441	EN PENVENTE 33004		83	1000	O AMERICAN SUPERIOR BIVD
, 	The fig.	• •	84		- 85 Zip Code
					PINTER HAVEN FL 33880
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					
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 seeds, 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 doligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	X Mich S DA				~ S/////
	Signature, typed or printed name Presistered ago			int signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		ND DIRECTORS	13.		
TITLE	P	DELETE	1,1 TITLE	1 -	PRESIDENT & CEO Change Addition ROBIN PREVER
NAME	DUFFY, BRIAN		1.2 NAME		4301 N. OCEAN BIND. A-1703
STREET ADDRESS	1234 LAUREL LN	,	1.3 STREE	ET ADDRESS	
CITY+ST-ZIP	SCHAUNEBURG IL		1.4 CITY-	ST-ZIP	
TITLE	AS	☐ DELETE	2.1 TITLE		chief Official and a management
NAME	SMITH, STEVEN	_	2.2 NAME	- 1	ADAM MADROUR
STREET ADDRESS	-5 LAWSON LN -	•••	2.3 STREE	ET ADDRESS	ONE BUFF ROAD
CITY-ST-ZIP	GREAT NECK NY		2. 4 C/TY+	ST-ZIP •	SARATOGA SPRINGS, NY 12866
TITLE	T	▼ DELETE	3.1 TITLE	(CHIEF FINANCIAL OFFICER Thange Addition
NAME	FELDMAN, MARK		3.2 NAME		GAYLE HENDERSON
STREET ADDRESS	33 BOND STREET		3.3 STREE	ET ADDRESS	2 WINDING ROAD
CITY-ST-ZIP	BRIDGEWATER NJ		3.4. CITY-	ST-ZIP	DELMAR, NY
TITLE	S	DELETE	4.1 TITLE		Director Change Addition
NAME	BOGEN, STEVEN M		4. 2 NAME		LEANY TOBOROFF
STREET ADDRESS	81 DAHLIA ST		4.3 STREE	ET ADDRESS	780-3RD AVE., 40TH Floor
CITY-ST-ZIP	STATEN ISLAND NY		4.4 CiTY-	ST-ZIP	NEW YORK MY 10017 Director - Change Addition
TITLE		☐ DELETE	5.1 TITLE		Dinecron Change Addition
NAME			5.2 NAME		BARRY COX
STREET ADDRESS			5.3 STREE	ET ADORESS	880 BOWLINE DR.
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	VERONA BEACH, FL 32963
TITLE	-	☐ DELETE	6.1 TITLE		BARRY COX 880 BOWLINE DR. VERONA BEACH, FL 32963 DIRECTOR Change Addition JEFFREY HEAVINIAND
NAME	•		6.2 NAME		JEFFREY HEAVIRIAND
STREET ADDRESS			6.3 STREI	ET ADDRESS	/ G/EN / 12015
3			64 CITY-	ST. 7IP	Dave CANVAL CA 92679

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 Statuter 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 enhowered 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 withyan address, with all other like empowered.

SIGNATURE!

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