*PROFÎT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000064991

KELHAR FOOD PRODUCTS, INC.

Principal Place of Business	Mailing Address		
710 SOUTH DIXIE HIGHWAY CORAL GABLES FL 33146	194 HOWARD STREET SUITE 203 NEW LONDON CT 06320	TREET	
Principal Place of Business	2a. Mailing Address		

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90053 007 ***150.00



Principal Place	e of Business	Mailing Address	<u> </u>) (BOILDS) (156 1619) Bill) EBILL BOILE BRILL BRILL BRILL BILL HILL HALD STEEL 1991
710 SOUTH DIXIE HIGHWAY 11 CORAL GABLES FL 33146 S		SUITE 203	194 HOWARD STREET			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed 08/21/1995
2. Principal Pl	ace of Business	2a. Mailing Add	ress			4. FEI Number Applied For
21		26 5 SHAWS	S COVE			06-1448734 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #				\$8.75 Additional
22		27 SUITE 2	203	_		5. Certificate of Status Desired
City & State	е	City & State				6. Election Campaign Financing S5:00 May be Trust Fund Contribution Added to Fees
Zip	Country	Zip		intry	,	8. This corporation owes the current year Intangible
24	25	06320	30 U	SA_		Personal Property Tax. Yes No
	9. Name and Address of Current	Registered Agent		Ļ		10. Name and Address of New Registered Agent
ADAR	n, Fernando s			81	Name	
	SOUTH DIXIE HIGHWAY			82 Street Address (P.O. Box Number is Not Acceptable)		
l	AL GABLES FL 33146			83		
				84	City	FL 85 Zip Code
11 Puguant	to the provisions of Sections 607 0502	and 607 1508 Flor	rida Statutes, the a	boy	e-named co	corporation submits this statement for the nurroose of changing its registered
office or r	egistered agent, or both, in the State of	Florida. Such chai	nge was authorized	d bv	tne corpora	ration's board of directors. I hereby accept the appointment as registered
agent. La	m familiar with, and accept the obligation	ons or, Section 607	.0505, Florida Stat	nres) .	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable.	(NOTE: Registered	d Ager	nt signature requ	quired when reinstating) DATE
12.	OFFICERS AND		13.	<u> </u>		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE 1.1 TI	ITLE		Change Addition
NAME	BERBERIAN, RICHARD L		1.2 N	AME		
STREET ADDRESS	800 HINGHAM ST STE 101 SOU	TH	1.3 S	TREE	T ADORESS	
CITY-ST-ZIP	ROCKLAND MA 02370		1.4 C	ITY-S	T-ZIP	
TITLE	D .		DELETE 2.1 TI	ITLE		Change Addition
NAME	BERBERIAN, JOAN		2.2 N	AME		
STREET ADDRESS	800 HINGHAM ST STE 101 SOU	TH	2.3 8	TREE	TADDRESS	
CITY-ST-ZIP	ROCKLAND MA 02370				ST-ZIP	Chânge Addillon
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NAME			3.2 N			ł
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NAME				VAME		
STREET ADDRESS					TADDRESS	İ
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STREET ADDRESS					ST-ZIP	
CITY-ST-ZIP TITLE			DELETE 6.1 TI		-	☐ Change ☐ Addition
\		. ت	6.2 N		}	
NAME OTREET LODDESS			1		T ADDRESS	İ
STREET ADDRESS			0.5 0		55. 250	

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 attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Richard L. Berber

181 982 1880